2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 319973

Entity Name: GOLDEN REALTY CORP. OF MIAMI

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O LERMAN AND LERMAN, P.A 48 EAST FLAGLER STREET, PENTHOUSE 101 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

C/O LERMAN AND LERMAN, P.A 48 EAST FLAGLER STREET, PENTHOUSE 101 MIAMI, FL 33131

FEI Number: 59-1220444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LERMAN AND LERMAN, PA LERMAN AND LERMAN. P.A. 48 EAST FLAGLER STREET, PENTHOUSE 101 MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition KOZOLCHY, BENNY KOZOLCHYK, BENNY Name: Name: Address: Address:

48 E. FLAGLER ST. (101) 48 E. FLAGLER ST. (101) City-St-Zip: MIAML FL City-St-Zip: MIAMI, FL 33131

Title: Title: () Delete (X) Change () Addition Name: LERMAN, ISIDORO Name: LERMAN, ISIDORO

48 E. FLAGLER ST. (101) 48 E. FLAGLER ST. (101) Address: Address: MIAMI, FL 33131 MIAMI, FL 33131 City-St-Zip: City-St-Zip:

Title: Title: () Delete TD (X) Change () Addition GORODETZKY, FELICIA GORODETZKY,, FELICIA Name: Name: Address:

8305 CRESPI BV 8305 CRESPI BLVD Address: City-St-Zip: MIAMI BEACH, FL City-St-Zip: MIAMI BEACH, FL

Title: () Delete Title: AS (X) Change () Addition LEAMAN, JORGE LERMAN, JORGE

Name: Name: Address: 48 E FLAGLER ST PH 101 Address: 48 E FLAGLER ST PH 101 City-St-Zip: City-St-Zip: MIAMI, FL 33131 MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JORGE LERMAN AS 04/27/2009