

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000003204

**Entity Name:** STREETS OF GOLD INC.

**Current Principal Place of Business:**

1600 MILL CREEK RD  
APT 102  
JACKSONVILLE, FL 32211

**Current Mailing Address:**

1600 MILL CREEK RD  
APT 102  
JACKSONVILLE, FL 32211 US

**FEI Number:** 45-4902086

**Certificate of Status Desired:** No

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

HARRELL, TONIA L  
1600 MIL CREEK RD  
APT 102  
JACKSONVILLE, FL 32211 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            CEO  
Name            HARRELL, TONIA L  
Address        1600 MILL CREEK RD  
                  APT 102  
City-State-Zip: JACKSONVILLE FL 32211

Title            CFO  
Name            JIGGETTS, LAWANDA  
Address        1600 MILL CREEK RD  
                  APT 102  
City-State-Zip: JACKSONVILLE FL 32211

Title            SECRETARY  
Name            CASH, NIKITA  
Address        1600 MILL CREEK RD  
                  APT 102  
City-State-Zip: JACKSONVILLE FL 32211

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TONIA L. HARRELL

**CEO/DIRECTOR**

**02/15/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date