

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000000134

Entity Name: GOLDEN STATE FOODS CORP.

Current Principal Place of Business:

18301 VON KARMAN AVE
SUITE 1100
IRVINE, CA 92612

FILED
Apr 02, 2024
Secretary of State
9227747688CC

Current Mailing Address:

18301 VON KARMAN AVE
SUITE 1100
IRVINE, CA 92612 US

FEI Number: 95-2670074

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 SECRETARY
Name PAGE, JOHN
Address 18301 VON KARMAN AVE
SUITE 1100
City-State-Zip: IRVINE CA 92612

Title PRESIDENT
Name DICK, BRIAN
Address 18301 VON KARMAN AVE
SUITE 1100
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name WETTERAU, STEPHEN
Address 18301 VON KARMAN AVE
SUITE 1100
City-State-Zip: IRVINE CA 92612

Title TREASURER
Name GOTTLIEB, LISA
Address 18301 VON KARMAN AVE
SUITE 1100
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name EL-HAGE, NABIL
Address 18301 VON KARMAN AVE
SUITE 1100
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name GOCHNAUER, RICHARD D
Address 18301 VON KARMAN AVE
SUITE 1100
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name ARMARIO, JOSÉ
Address 18301 VON KARMAN AVE
SUITE 1100
City-State-Zip: IRVINE CA 92612

Title DIRECTOR
Name LISTI, FRANK
Address 18301 VON KARMAN AVE
SUITE 1100
City-State-Zip: IRVINE CA 92612

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

SIGNATURE: JOHN PAGE

SECRETARY

04/02/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name WILLIAMS, JAMES

Address 18301 VON KARMAN AVE
SUITE 1100

City-State-Zip: IRVINE CA 92612