## 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003238

Entity Name: GOLDEN OUTLOOK, INC.

**Current Principal Place of Business:** 

5995 PLAZA DRIVE CYPRESS. CA 90630

**Current Mailing Address:** 

5995 PLAZA DRIVE CYPRESS. CA 90630 US

FEI Number: 20-3420886 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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

FILED Mar 22, 2019

**Secretary of State** 

5309898621CC

## Officer/Director Detail:

Title CEO/DIRECTOR Title **SECRETARY** KARP, DONALD M. Name Name BERG, BARBARA E. Address Address 5995 PLAZA DRIVE 5995 PLAZA DRIVE City-State-Zip: CYPRESS CA 90630 CYPRESS CA 90630 City-State-Zip:

Title ASSISTANT SECRETARY Title **TREASURER** Name LANG, HEATHER ANASTASIA Name GILL, PETER MARSHALL Address 9900 BREN ROAD EAST Address 9900 BREN ROAD EAST MINNETONKA MN 55343 City-State-Zip: City-State-Zip: MINNETONKA MN 55343

Title DIRECTOR Title DIRECTOR

NameDANZ, ROBERT MICHAELNameCULHANE, DEBORAH ANNEAddress11000 OPTUM CIRCLEAddress100 QUANNAPOWITT PKWY<br/>STE 405 MA023-1000

City-State-Zip: EDEN PRAIRIE MN 55343

ity-State-Zip: EDEN FRAIKIE IVIN 59343 City-State-Zip: WAKEFIELD MA 01880

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: HEATHER ANASTASIA LANG

ASSISTANT SECRETARY

03/22/2019