

2021 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

Officer/Director Detail :

Title VP, SALES
Name GREEN, SCOTT M.
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title CHAIR
Name CARR, PATRICK FRANCIS
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title ASSISTANT SECRETARY
Name LEWIS-DAVID, JENNIFER LUNDGREN
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title SECRETARY
Name SULLIVAN, RICHARD CHARLES
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title CFO
Name SCHOETTLE, JEREMY MICHAEL
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title PRESIDENT
Name KARP, DONALD MICHAEL
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title DIRECTOR
Name FRANK, JOHN FREDERICK
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title DIRECTOR
Name CARR, PATRICK FRANCIS
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

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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: HEATHER ANASTASIA LANG**ASSISTANT SECRETARY** 04/24/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KARP, DONALD MICHAEL
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title CEO
Name KARP, DONALD MICHAEL
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title TREASURER
Name GILL, PETER MARSHALL
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630

Title ASSISTANT SECRETARY
Name LANG, HEATHER ANASTASIA
Address 5995 PLAZA DRIVE
City-State-Zip: CYPRESS CA 90630