

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 320122 (5)

1. Corporation Name:

THE GOLDEN BUDDHA, INC.



Principal Place of Business

Mailing Address

6627 CONN AVE
SARASOTA FL 34243
US

6627 CONN AVE
SARASOTA FL 34243
US

2. Principal Place of Business

2a. Mailing Address

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

MOY, DOROTHY Y
6627 CONNECTICUT AVE
SARASOTA FL 34243

3. Date Incorporated or Qualified

08/18/1967

3a. Date of Last Report

06/13/1995

4. FEI Number

59-1172005

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0509 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of New Agent

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

PD
MOY, ROBERT M
6627 CONNECTICUT
SARASOTA, FL 00000

☐ DELETE

2. TITLE

VD
TOM, THIC JOC
4805 SHERRY LANE RD. 5
FORT MYERS FL

☐ DELETE

3. TITLE

P
MOY, DOROTHY Y.
6627 CONNECTICUT
SARASOTA FL

☐ DELETE

4. TITLE

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5. TITLE

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11. TITLE

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12. TITLE

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13. TITLE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE

2. 2. TITLE

3. 3. TITLE

4. 4. TITLE

5. 5. TITLE

6. 6. TITLE

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33. 33. TITLE

34. 34. TITLE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 or person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ramona Y. Moy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-11-1996. President

Day

Daytime Phone #

CR2E034 (12/95)