FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997

CITY-ST-ZIP

14. I do hereby ce'l ly that t Lam an officer or o appears in Block 1

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

T CONTRA BARA BARA TARAK KARAK KARAK KARAK BARAK ANDA BARAK ALDA BARA BARA BARAK BARAK BARAK BARAK

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 403776

(8)

GOLDEN ELECTRIC CORP.

Principal Place of Business Mailing Address 1359 N W 88TH AVENUE 1359 N W 88TH AVENUE					- 19411		
MIAMI FL 331		MIAMI FL 33172-3019					
					3. Date Incorporated or Qualified 06/26/1972	3a. Date of Last 04/11/1996	
2. Principa F	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-1401833		Not Applicable
Suite, Apt 22		Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & Stat 23	e	City & State			Election Campaign Financing Trust Fund Contribution		May Be d to Fees
Zip	Country	Zip	Cou	intry	8. This corporation has liability for i		s. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Re	sistered Agent	
	rcia,rafael			81 Name			
	9 N.W. 88TH AVE.			82 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
MIA	MI FL 33128				· · · · · · · · · · · · · · · · · · ·		
				63			
				84 City		85 Zij	o Code
			***************************************	<u> </u>			
office or a agent 12	to the provisions of Sections 607.0 registered agent, or both, in the Sta ini familiar with, and accept the obl	i502 and 607.1508, Florida Statu ite of Florida. Such change was ligations of, Section 607.0505. F	ites, the a authorize Iorida Sta	bove-named corp d by the corpora lutes.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing it the appointment a	its registered is registered
SIGNATURE							
	Signature, Expedici pomeniran e of registered a			d Agent signature requ		DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD CARCIA DAEAEI	☐ DEFELE	1 1 T			Change	Addition
NAME	GARCIA,RAFAEL 1359 N.W. 88TH AVE.		1.2 N				
STREET ADDRESS)			TREET ADDRESS			
CITY - ST - 7/P	MIAMI FL.	DELETE	_	TY-ST-ZIP		T Observe	111 (222)
TILE		FT DEFEIE	21 T	1		☐ Change	Addition
NAME	GARCIA,ALFREDO		22 N				
STREET ADDRESS	1359 N.W. 88TH AVE.			TREET ADDRESS			
CITY - S1 - ZIP	MIAMI FL	DECETE		ITY-ST-ZIP			1.1222
TOTALE	VD Garcia Dignora	☐ DELETE	31 T			L. Change	Addition
NAME	1359 N.W. 88TH AVE.		32 N				
STREET ADDRESS	§ -			TREET ADDRESS			
CITY - ST - ZIP	MIAMI FL	Therete		HTY-ST-ZIP		116	
TITLE	V CADOIA LAZADO	☐ DELETE	41 T			∟ Change	Addition
HAME	GARCIA,LAZARO		4 2 N				
STREET ADDRESS	1359 N.W. 88TH AVE.			TREET ADDRESS			
CITY - ST - ZiP	MIAMI FL	DELETE		TY-ST-ZIP		Change	Addition
TITLE		☐ nere}e	51 TI	į.		L Uriange	- Addition
NAME			5.2 N				
STREET ADDRESS				TREET ADDRESS			
CITY-S1-ZIP		DELETE	_	TY-ST-ZIP		Change	Addition
TITLE	<u> </u>		611	1		LL GIRTIGE	L Magition
NAME			62 N	t			
STREET ADDRESS	I		■ 6.3 S	TREET ADDRESS			

6.4 C/TY - ST - ZIP

information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the example of the supplimental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that if the suppression on the loceive, or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name it is in the loceive, or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a suppression of the loceive or trustee.