2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED

E UN SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # 528124 Apr 24, 2000 8:00 am Secretary of State 1. Entity Name GOLDY ENTERPRISES, INC. 04-24-2000 90060 047 ***150.00 Principal Place of Business Mailing Address 1335 S ANDREWS AVE 1335 S ANDREWS AVE FT LAUDERDALE FL 33316-1837 FT LAUDERDALE FL 33316 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-1718181 Not Applicable Zip Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 7.-Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name UMSCHWEIS, FRED Street Address (P.O. Box Number is Not Acceptable) 778 HERITAGE DR WESTON FL 33326 Cameron 8. The above named entity anomits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE (NOTE: negitiered Agent signature required when reinstating d title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition ☐ Delete TITLE TITLE Hert, matthew prive UMSCHWEIS, FRED NAME 778 HERITAGE DRIVE STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP weston, 41a WESTON FL TITLE Delete TITLE Hert, Rebacca UMSCHWEIS, ROCHELLE NAME NAME STREET ADDRESS 778 HERITAGE DRIVE STREET ADDRESS weston, Fla CITY-ST-ZIP CITY-ST-ZIP WESTON FL Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplementation in the composition of the corporation or the composition of the corporation or the composition of the corporation or the composition of the corporation of the corporation or the corporation of th