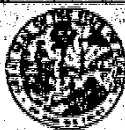


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 23 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 572527 (0)

1. Corporation Name

GOLDIST CONSTRUCTION INCORPORATED

Principal Place of Business

3389 SHERIDAN ST.
BOX 320
HOLLYWOOD FL 33021

Mailing Address

3389 SHERIDAN ST.
P.O. BOX 320, N/A
HOLLYWOOD FL 33021
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/24/1978

3a. Date of Last Report

07/28/1994

4. FEI Number

59-1830728

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PLATT, STEPHEN M
2221 N. 50TH AVE.
HOLLYWOOD FL 33021

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 607.0502 and 607.1508, 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VS
NAME	PLATT, STEPHEN M
STREET ADDRESS	2221 N. 50TH AVE.
CITY- ST- ZIP	HOLLYWOOD FL
TITLE	V
NAME	GRIESDORF, GARY
STREET ADDRESS	65 OVERLEA BLVD - #300
CITY- ST- ZIP	TORONTO, CANADA 08800
TITLE	PTD
NAME	GOLDIST, GEORGE D.
STREET ADDRESS	65 OVERLEA BLVD #300
CITY- ST- ZIP	CANADA M4
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	ZIP CODE 33021
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	ZIP CODE M4H 1P1
2.4 CITY- ST- ZIP	☒ Change ☒ Addition
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	TORONTO, CANADA M4H 1P1
3.4 CITY- ST- ZIP	☐ Change ☐ Addition
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

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 110.07(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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEPHEN M. PLATT

3/20/95 (305) 989-9331