## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F01000005876

Entity Name: GOLDEN SHRIMP INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	IITVILLE AVE. LES, FL 33853	3			
Current Mailing Address:			New Mailing Address:		
	IITVILLE AVE. LES, FL 33853	3			
FEI Number	: 35-2095969	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
6820 COD	EDA, RAYMONI DY ST. HOLLYN DOD, FL 3302	VOOD			
	e named entity e of Florida.	submits this statement for the μ	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATU	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
	mpaign Financin	g Trust Fund Contribution(). TORS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCD ( SEPULVEDA, F 4631 S. WAYN FORT WAYNE,	E AVE.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( SEPULVEDA, I 4631 S. WAYN FORT WAYNE,	E AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: Citv-St-Zip:	VTD ( SEPULVEDA, F 6820 CODY ST HOLLYWOOD.	<del>.</del> .	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RUBEN N SEPULVEDA PCD 04/30/2003