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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

G48010

(4)

DOCUMENT #

1. Corporation Name

	GOLD CENTER, INC.							
Principal Plac	ce of Business	Mailing Address	***************************************		4 IBBIRIN OCH BLOBY SOVIN OBIBN SIN	li beli brezi bibi.		ir dadai dadii i es i
140 N.E. 2 Miami Fl. 3	ND AVENUE 33132	140 N.E. 2ND AVEN Miami FL 33132	UE					
2 Principal F	Place of Business				3. Date Incorporated or Qualified 07/08/1983	3a. Date o	of Last F /01/19	
21 FOI CIDAI F	Tace or Business	2a. Mailing Address		4. FEI Number		Applied For		
Suite, Apt.	# etc	26			59-2335641			Not Applicable
City & State		27	version and the second		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23	re;	City & State			6. Election Campaign Financing	F-7	\$5.0	0 May Be
Zip	Country	28 Zin			Trust Fund Contribution	LJ	Adde	d to Fees
24			Zip Country			8. This corporation has liability for intangible tax under s 199.032,		
	9. Name and Address of Cu	rrent Registered Agent			Florida Statutes Yes			
			8	1 Name	10. Name and Address of New R	egistered Ag	ent	
AFRIAT	, DAVID		L	1 12.713				
	I. BAY ROAD		82	2 Street Addi	ress (P.O. Box Number is Not Acceptabl	e)		
	BEACH FL 33140		83	3				
			84	1 - 7				Code
11. Pursuant t	to the provisions of Sections 607.0	502 and 607.1508, Florida Statut	es, the above	Inamed coroor	ration submits this statement for the purp rd of directors. I hereby accept the appo	<u> </u>		
or register familiar wit	ed agent, or both, in the State of F th, and accept the obligations of, S	lorida. Such change was authoriz	ed by the con	poration's boar	rd of directors. Thereby accept the appo	ose of chang Intment as rec	ing Its re pistered	egistered office
SIGNATURE	or a second the oringer on to	Control por 100001, Frontak 248(0188	j.				,	ogo. ki i bili
- SIGNATIONE	Signature, typed or printed name of registered a	gont are the Lappicable (NC	OTE: Registered Are	ent signature required	durbon sainthatus			
12.	OFFICERS	AND DIRECTORS	13.	AN DIGITAL OF PARTIES	ADDITIONS/CHANGES TO OFFIC	DATE PEIDO AND FNI	DECTO	70 11 10
TITLE	PST	☐ DELETE	1 1 TITLE					RS IN 12 Addition
NAME	AFRIAT, DAVID		1.2 NAME	}		μ,	zna iga	[] Maddedii
STREET ADDRESS	2385 N. BAY ROAD		1.3 STREE	T ADDRESS				i
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY - S	ST-ZIP				
TITLE	\$	DELETE	2. 1 117LF					C Addition
NAMÉ	AFRIAT, ESTHER					<u> </u>	hanne	
STREET ADDRESS	2385 N. BAY ROAD		2.2 NAME				Change	Addition
CITY - ST - ZIP			1	T ADDRESS			hange	☐ waaaaa
	MIAMI BEACH FL		1	T ADDRESS			Change	· Mudition
	MIAMI BEACH FL	☐ DELETE	2 3 STREET	T ADDRESS				
LAME	MIAMI BEACH FL	DELETE	23 STREET 24 City- 5	T ADDRESS				Addition
IAME TREET ADDRESS	MIAMI BEACH FL	C DELETE	2 3 STREET 2 4 CITY - S 3. 1 TITLE 3.2 NAME	T ADDRESS				
IAME ITREET ADDRESS ITY-S1-ZIP	MIAMI BEACH FL		2 3 STREET 2 4 CHY-S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CHY-S	T ADDRESS ST-ZIP T ADDRESS				
JAME Treet address Sity-\$1-zip MLE	MIAMI BEACH FL	☐ DELETE	23 STREET 24 CITY-S 3. 1 TITLE 3.2 NAME 3.3. STREET	T ADDRESS ST-ZIP T ADDRESS		[] 6	hange	Addition
IAME ITREET ADDRESS ITY-S1-ZIP ITLE IAME	MIAMI BEACH FL		2 3 STREET 2 4 CHY-S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CHY-S	T ADDRESS ST-ZIP T ADDRESS		[] 6	hange	
IAME TREET ADDRESS ITY-S1-ZIP PLE AME TREET ADDRESS	MIAMI BEACH FL		2 3 STREET 2 4 CITY - S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY - S 4.1 TITLE	T ADDRESS ST - ZIP T ADDRESS ST - ZIP		[] 6	hange	Addition
IAME TREET ADDRESS ITY-ST-ZIP OTLE AME TREET ADDRESS ITY-ST-ZIP	MIAMI BEACH FL	[] DELETE	2 3 STREET 2 4 CITY - S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY - S 4. 1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY - S	T ADDRESS ST - ZIP T ADDRESS ST - Z-P ADDRESS		[] 6	hange	Addition
IAME TREET ADDRESS ITY-S1-ZIP ITLE AME IREET ADDRESS ITY-S1-ZIP TLE	MIAMI BEACH FL		2 3 STREET 2 4 CITY-S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5. 1 TITLE	T ADDRESS ST - ZIP T ADDRESS ST - Z-P ADDRESS		[] 6	hange hange	Addition
IAME ITREET ADDRESS ITY-S1-ZIP ITLE IME ITREET ADDRESS ITY-S1-ZIP ITLE AME	MIAMI BEACH FL	[] DELETE	2 3 STREET 2 4 CITY - S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY - S 4. 1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY - S	T ADDRESS ST - ZIP T ADDRESS ST - Z-P ADDRESS		□ c	hange hange	Addition Addition
IAME ITREET ADDRESS ITY-S1-ZIP ITLE AME ITREET ADDRESS ITY-S1-ZIP ITLE AME ITREET ADDRESS ITY-ST-ZIP ITLE AME	MIAMI BEACH FL	[] DELETE	2 3 STREET 2 4 CITY-S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5. 1 TITLE	T ADDRESS ST. ZIP T ADDRESS SI - Z-P ADDRESS SI - Z-P		□ c	hange hange	Addition Addition
IAME ITREET ADDRESS ITY-S1-ZIP ITLE AME IREET ADDRESS ITY-S1-ZIP ITLE AME IREET ADDRESS ITY-S1-ZIP ITREET ADDRESS ITY-S1-ZIP	MIAMI BEACH FL	☐ DELETE	2 3 STREET 2 4 CITY-S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4. 1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5. 1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-ST	T ADDRESS ST. ZIP T AGORESS ST. ZIP ADDRESS ST. ZIP ADDRESS ADDRESS		□ c	hange hange	Addition Addition
IAME ITREET ADDRESS ITY-ST-ZIP ITLE AME IREET ADDRESS ITY-ST-ZIP ITLE AME IREET ADDRESS ITY-ST-ZIP ITLE IREET ADDRESS ITY-ST-ZIP ITLE	MIAMI BEACH FL	[] DELETE	2 3 STREET 2 4 CITY-S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4. 1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5. 1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-SI 6.1 TITLE	T ADDRESS ST. ZIP T AGORESS ST. ZIP ADDRESS ST. ZIP ADDRESS ADDRESS		□ c	hange hange	Addition Addition
IAME TREET ADDRESS ITY-S1-ZIP TILE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS TREET ADDRESS TREET ADDRESS TY-S1-ZIP TLE AME	MIAMI BEACH FL	☐ DELETE	2 3 STREET 2 4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 6.1 TITLE 6.2 NAME	T ADDRESS ST. ZIP T ADDRESS SI-Z-P ADDRESS SI-ZIP ADDRESS 1-ZIP		Cı	hange hange	Addition Addition
ITTLE NAME STREET ADDRESS DITY-S1-ZIP TITLE IAME STREET ADDRESS STY-S1-ZIP TITLE AME TREET ADDRESS ITY-S1-ZIP TITLE AME TREET ADDRESS TY-S1-ZIP TITLE AME TREET ADDRESS TY-S1-ZIP TITLE TREET ADDRESS TY-S1-ZIP TITLE TREET ADDRESS TY-S1-ZIP	MIAMI BEACH FL	☐ DELETE	2 3 STREET 2 4 CITY-S 3. 1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4. 1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5. 1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-SI 6.1 TITLE	T ADDRESS ST. ZIP T ADDRESS SI-Z-P ADDRESS SI-ZIP ADDRESS 1-ZIP		Cı	hange hange	Addition Addition

overpremental annual report is true and accurate and that my signature shall have the same legal effect as if made under the series of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name execute the same legal effect as if made under some with an address. oath; that I am an officer or afrector of the corporation or appears in Block 12 or Block 13 if changed, or on in a

SIGNATURE:

O NAME OF SIGNING OFFICER OR DIRECTOR

(205) 381-8550.