2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H53493

Entity Name: GOLDCOAST BEEF, INC.

FILED Jan 03, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6415 LAKE WORTH RD

SUITE #207

GREENACRES, FL 33463 US

Current Mailing Address: New Mailing Address:

6415 LAKE WORTH RD SUITE #207

GREENACRES, FL 33463 US

FEI Number: 59-2536608 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TURNER, C. B. TURNER, C. B.

2301 N FEDERAL HWY 6415 LAKE WORTH RD #207 BOCA RATON, FL 33431 US GREENACRES, FL 33463 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 01/03/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC () Delete Title: PRES (X) Change () Addition

Name: TURNER, C.B.,
Address: 2301 N FEDERAL HWY Address: 6415 LAKE WORTH RD #207

City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: GREENACRES, FL 33463

Title: STD () Delete Title: STD (X) Change () Addition Name: TURNER, JOYCE, Name: TURNER, JOYCE,

 Address:
 2301 N FEDERAL HWY
 Address:
 6415 LAKE WORTH RD #207

 City-St-Zip:
 BOCA RATON, FL 33431
 City-St-Zip:
 BOCA RATON, FL 33463

Title: DP (X) Delete Title: () Change () Addition

 Name:
 ESTEP, JOHANNAH
 Name:

 Address:
 13910 PADDOCK DR
 Address:

 City-St-Zip:
 WELLINGTON, FL 33414
 City-St-Zip:

Title: AST () Delete Title: AST (X) Change () Addition

 Name:
 FAUCETT, JOYCE
 Name:
 FAUCETT, JOYCE

 Address:
 4245 S 57TH AVE #203
 Address:
 3835 ACE RD W

 City-St-Zip:
 GREENACRES, FL 33463
 City-St-Zip:
 LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOYCE FAUCETT AST 01/03/2007