

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H53493

Entity Name: GOLDCOAST BEEF, INC.

FILED  
May 03, 2008  
Secretary of State

## Current Principal Place of Business:

6415 LAKE WORTH RD  
SUITE #207  
GREENACRES, FL 33463 US

## New Principal Place of Business:

3835 ACE RD W  
LAKE WORTH, FL 33467 US

## Current Mailing Address:

6415 LAKE WORTH RD  
SUITE #207  
GREENACRES, FL 33463 US

## New Mailing Address:

3835 ACE RD W  
LAKE WORTH, FL 33467 US

FEI Number: 59-2536608

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TURNER, C. B.  
6415 LAKE WORTH RD #207  
GREENACRES, FL 33463 US

## Name and Address of New Registered Agent:

TURNER, C. B.  
11198 CLOVER LEAF CIRCLE  
BOCA RATON, FL 33428 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:

05/03/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: TURNER, C.B.,  
Address: 6415 LAKE WORTH RD #207  
City-St-Zip: GREENACRES, FL 33463

Title: STD ( ) Delete  
Name: TURNER, JOYCE,  
Address: 6415 LAKE WORTH RD #207  
City-St-Zip: BOCA RATON, FL 33463

Title: AST ( ) Delete  
Name: FAUCETT, JOYCE  
Address: 3835 ACE RD W  
City-St-Zip: LAKE WORTH, FL 33467

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: TURNER, C.B.,  
Address: 11198 CLOVER LEAF CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

Title: STD (X) Change ( ) Addition  
Name: TURNER, JOYCE,  
Address: 11198 CLOVER LEAF CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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

05/03/2008

Electronic Signature of Signing Officer or Director

Date