

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K09606

Entity Name: GOLDEN EARRINGS, INC.

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

% ARI ERBLAT
8846 STATE ROAD 84
DAVIE, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

% GOLDEN EARRINGS/ARI ERBLAT
8846 STATE ROAD 84
DAVIE, FL 33324 US

New Mailing Address:

FEI Number: 59-2339802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERBLAT, ARI
8846 STATE RD 84
DAVIE, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ERBLAT, ARI,
Address: 1541 NW 101 AV
City-St-Zip: PLANTATION, FL 33322

Title: DVS () Delete
Name: ERBLAT, ALEXANDER
Address: 3101 PORTO FINO PT #03
City-St-Zip: PLANTATION, FL

Title: T () Delete
Name: ALTNEU, JASON
Address: 8153 SEVERN DR #A
City-St-Zip: BOCA RATON, FL 33343

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ARI ERBLAT

PD

01/08/2009

Electronic Signature of Signing Officer or Director

Date