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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

GOLD INVESTIGATIONS, INC. Principal Place of Business Mailing Address 8211 W BROWARD BLVD STE 230 8211 W BROWARD BLVD STE 230 PLANTATION FL \$3324 PLANTATION FL 33324 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/19/1989 2. Principal Place of Business FFI Number Applied For 65-0129056 21 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be 6, Election Campaign Financing 23 **Trust Fund Contribution** Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 💢 Yes 24 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WEINBERG, STEVEN A 8000 PETERS ROAD SUITE 200 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 В4 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. Lam familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TIT: F 11 THE **GOLD, HARRIET** NAME 1.2 NAME 8211 W BROWARD BLVD., #230 STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL** CITY-ST-ZIP 1.4 CiTY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CiTY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 41 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change TITLE 6.1 TITLE Addition NAME 6.2 NAME

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 impowered to execute this report as required by Chapter, 607, Florida Statutes; and that my name appears in

6.3 STREET ADDRESS

STREET ADDRESS

FILED

May 26 1998 8:00am

Secretary of State