

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 04, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # L02000014749  
 1. Entity Name  
 GOLDEN MARKETING OPPORTUNITIES, LLC



Principal Place of Business  
 2751 SOUTH OCEAN DRIVE  
 SUITE 705 SOUTH  
 HOLLYWOOD, FL 33019

Mailing Address  
 4000 HOLLYWOOD BLVD  
 SUITE 215 SOUTH  
 HOLLYWOOD, FL 33021



02182008No Chg-LLC CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROSENBERG, JACK N  
 4000 HOLLYWOOD BLVD  
 SUITE 215 SOUTH  
 HOLLYWOOD, FL 33021

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000847327  
 03/19/08-80014-024 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO GOLDMEER, CONSTANCE 2751 SOUTH OCEAN DRIVE #705S HOLLYWOOD, FL 33019
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Constance Goldmeier* 2/18/08 954-923-3243  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #