## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L86874 (9)

**GOLAN INVESTMENT, INC.** 

Mailing Address

Principal Place of Business 3620 N. 53RD AVENUE PARK HOLLYWOOD FL 33021

3620 N. 53RD AVENUE PARK HOLLYWOOD FL 33021

**FILED** May 13 1998 8:00am Secretary of State

954-



***************************************						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 07/13/1990		
<b>—</b>	lace of Business	28. Mailing Address				4. FEI Number Applied For		
21	W	[26]				65-0208141 Not Applicable		
Suite, Apt.	#, 81C.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	6	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the current year Intangible		
24	25				Personal Properly Tax due June 30.  Yes No			
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  COLAN ANNON 81 Name								
GOLAN, AMNON				81 Name				
3620 N. 53RD AVE.			-	82 Street Address (P.O. Box Number is Not Acceptable)				
FT	LAUDERDALE FL 33021							
				83		·		
			-	84	City	FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the ab	ove	-named	corporation submits this statement for the purpose of changing its registered		
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
agent. I am temiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Stonature typed or printed name of registered agent	and title d applicable (NOTE	Registered	Aner	t signature	e required when reinstating) DATE		
12.	OFFICERS AND		13.		n dig in ord	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DPS	DELETE	1.1 TIU	ιE		Change Addition		
NAME	GOLAN, AMNON		1.2 NAI	ME				
STREET ADDRESS	9444 \$TIDUNG DD #B 490		13 ST	REFT	ADDRESS	3620 N. 53 AVE		
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CIT			HOLLYWOOD FL 33021		
TITLE	DVP	DELETE	2.1 TITI			☐ ☐ Addition		
NAME	<b>G</b> OLAN, DINA	•	2.2 NA	ME				
STREET ADDRESS	\$111 STIRLING RD, #B-132		2.3 STREE		ADDRESS	36 20 N 53 AVE		
CITY-ST-ZIP	FT LAUDERDALE FL		2. 4 CII			HOLLYWOOD FL 33021		
TITLE		DELETE	3.1 701	_	1-2.11	Change Addition		
NAME	GOLAN, SARI		3.2 NAI	MF		SCHACLETE SOLD		
STREET ADDRESS	\$111 STIRLING RD, #8-132	4D 100		3.3 STREET ADDRESS 34		SCHACHTEL, SARJ 36 20 N 53 AUG		
CITY-ST-ZIP	FT LAUDERDALE FL	AIC CI		3.4. CITY-ST-ZIP		HOLLYWOOD FL 33021		
TITLE	DVP	DELETE	4.1 Trill			☐ Change ☐ Addition		
NAME	GOLAN, GUY	<del>_</del>	4. 2 NA					
STREET ADDRESS	\$111 STIRLING RD, #B0132		1		ADDRESS	3620 N 53 AVE		
CITY-ST-ZIP	FT LAUDERDALE FL		4.4 CIT			HOLLY WOOD FL 3302/		
TITLE		DELETE	5.1 TITI	_		Change Addition		
NAME			5.2 NA		:	_ ,		
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			5.4 CIT					
TITLE		DELETE	6.1 TITLE		r.ı.	☐ Change ☐ Addition		
NAME			6.2 NAI	ME				
STREET ADORESS					ADDRESS			
CITY-ST-ZIP			6.4 CIT					
14. I hereby o	ertify that the information supplied with	this filing does not qualify fo	r the exer	mpli	ion state	1 ed 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in								
Block 12 of Block 15 it changed, or of an adactiment with an additions.								