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95 MAY -1 PM 1994

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L91034** (3)

1. Corporation Name

GOLDEN HARVEST DEVELOPMENT, INC.

Principal Place of Business

**3111 UNIVERSITY DRIVE
BAY #125
CORAL SPRINGS FL 33065**

Mailing Address

**3111 UNIVERSITY DRIVE
BAY #125
CORAL SPRINGS FL 33065**

Do Not Write In This Space

3. Date incorporated or qualified
07/30/1990

3a. Date of Last Report
04/29/1994

4. FCI Number
65-0210562

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has adopted, for compliance with the Florida Statutes, the following:

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**MORANIS, ROBERT J.
1001 SOUTH ANDREWS AVE.
SUITE 101
FT. LAUDERDALE FL 33316**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL 65 Zip Code

11. Pursuant to the provisions of Sections 607.01(1)(b) and 607.01(2)(b), Florida Statutes, the above named corporation certifies 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, the duly elected and appointed registered agent, and the duly elected and appointed the obligator of Sections 607.01(1)(b), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. NAME
**PSD
KWOK, ERIC T.
11241 NW 45TH ST
CORAL SPRINGS FL**

2. NAME
**DVI
LEUNG, YIU TAO
2944 NW 94 AVENUE
CORAL SPRINGS FL**

3. NAME
**S
LAU, KIM CHAU
9855 WESTVIEW DR #717
CORAL SPRINGS FL**

4. NAME
**S
LAU, KIM CHAU
9855 WESTVIEW DR #717
CORAL SPRINGS FL**

5. NAME
**S
LAU, KIM CHAU
9855 WESTVIEW DR #717
CORAL SPRINGS FL**

6. NAME
**S
LAU, KIM CHAU
9855 WESTVIEW DR #717
CORAL SPRINGS FL**

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.01(1)(b), 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 this corporation or the registered broker or person responsible for the filing of this report as required by Chapter 607, Florida Statutes, and that my name appears in the list of officers, directors, or other persons with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lau, Kim Chau

4-28-95 (305)344-8990