


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90046 050 ****55.00

DOCUMENT # L92000000060

1. Entity Name
GOLF PARK, L.C.



Principal Place of Business
**150 S.E. 2ND AVENUE
 SUITE 1002
 MIAMI, FL 33131**


Mailing Address
**444 BRICKELL AVENUE
 SUITE 51-246
 MIAMI, FL 33131**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

20043351



04272006 Chg-LLC CR2E083 (11/05)

4. FEI Number
65-0396935

Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**IBC FIDUCIARY INC.
 100 SE 2ND ST.
 SUITE 2315-A
 MIAMI, FL 33131**

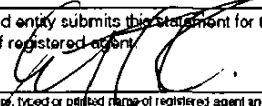
7. Name and Address of New Registered Agent

Name **IBC FIDUCIARY INC.**

Street Address (P.O. Box Number is Not Acceptable)
**100 S.E. 2ND STREET
 SUITE 2222-A**

City **MIAMI** State **FL** Zip Code **33131**

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  **IBC Fiduciary Inc.** DATE **04/27/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE/Registered Agent signature required when reinstating)


Filing Fee is \$50.00 Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM IBC FIDUCIARY INC. <input checked="" type="checkbox"/> Delete 100 SE 2ND ST #2315 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CANADIAN FUNDS INC. <input checked="" type="checkbox"/> Delete 1602 ALTON ROAD #100 MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input type="checkbox"/> Delete STILLEX CORPORATION 444 BRICKELL AVE 51-246 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input type="checkbox"/> Delete DEUTSCHE FINANZ A.G. CORP. 2533 NORTH CARSON STREET CARSON CITY, NV 89706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input type="checkbox"/> Delete INTERNATIONAL CENTER 150 S.E. 2ND AVENUE STE 1002 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input type="checkbox"/> Delete EUROPEAN INVESTMENTS, INC. 444 BRICKELL AVE., 51-246 MIAMI, FL 33131

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition IBC FIDUCIARY INC. 100 SE 2 ND ST # 2222-A MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CANADIAN FUNDS INC. 2121 NE 40 TH AVE. OCALA, FL 34470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **Canadian Funds Inc.** DATE **4/27/06** 305.358.4441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone

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