
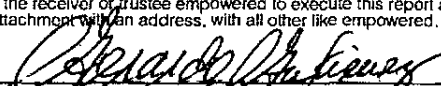


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2005 08:00 AM
Secretary of State

DOCUMENT # M34732 1. Entity Name GOLD COAST CASTING, INC.																																																		
Principal Place of Business 695 N. STATE ROAD 7 HOLLYWOOD, FL 33021		Mailing Address 695 N. STATE ROAD 7 HOLLYWOOD, FL 33021																																																
DO NOT WRITE IN THIS SPACE																																																		
6. Name and Address of Current Registered Agent BEVERLY JEAN OVIATT 8001 S.W. 7TH COURT NORTH LAUDERDALE, FL 33068		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																
10. OFFICERS AND DIRECTORS <table border="1"><tr><td>TITLE</td><td>VP</td></tr><tr><td>NAME</td><td>GUTIERREZ, GERARDO</td></tr><tr><td>STREET ADDRESS</td><td>6136 MONROE ST.</td></tr><tr><td>CITY-ST-ZIP</td><td>HOLLYWOOD, FL</td></tr><tr><td>TITLE</td><td>S</td></tr><tr><td>NAME</td><td>ESTRADA, ILEANA G</td></tr><tr><td>STREET ADDRESS</td><td>6136 MONROE ST.</td></tr><tr><td>CITY-ST-ZIP</td><td>HOLLYWOOD, FL</td></tr><tr><td>TITLE</td><td>P</td></tr><tr><td>NAME</td><td>GUAJARDO, LUIS</td></tr><tr><td>STREET ADDRESS</td><td>695 N. ST. RD. 7</td></tr><tr><td>CITY-ST-ZIP</td><td>HOLLYWOOD, FL</td></tr><tr><td>TITLE</td><td>D</td></tr><tr><td>NAME</td><td>GUTIERREZ, ROMAN</td></tr><tr><td>STREET ADDRESS</td><td>695 N. ST. RD. 7</td></tr><tr><td>CITY-ST-ZIP</td><td>HOLLYWOOD, FL</td></tr><tr><td>TITLE</td><td></td></tr><tr><td>NAME</td><td></td></tr><tr><td>STREET ADDRESS</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td></tr><tr><td>TITLE</td><td></td></tr><tr><td>NAME</td><td></td></tr><tr><td>STREET ADDRESS</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td></tr></table>		TITLE	VP	NAME	GUTIERREZ, GERARDO	STREET ADDRESS	6136 MONROE ST.	CITY-ST-ZIP	HOLLYWOOD, FL	TITLE	S	NAME	ESTRADA, ILEANA G	STREET ADDRESS	6136 MONROE ST.	CITY-ST-ZIP	HOLLYWOOD, FL	TITLE	P	NAME	GUAJARDO, LUIS	STREET ADDRESS	695 N. ST. RD. 7	CITY-ST-ZIP	HOLLYWOOD, FL	TITLE	D	NAME	GUTIERREZ, ROMAN	STREET ADDRESS	695 N. ST. RD. 7	CITY-ST-ZIP	HOLLYWOOD, FL	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<div style="text-align: center;">000000291307 04/07/05-80025-005 150.00</div> DO NOT WRITE IN THIS SPACE
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12. I hereby 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 report or supplemental 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <div style="text-align: right;">4/7/05 954-966-9630 <small>Date Daytime Phone #</small></div>																																																		