


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2008 08:00 A
Secretary of State

DOCUMENT # M34732 1. Entity Name GOLD COAST CASTING, INC.	
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Principal Place of Business 695 N. STATE ROAD 7 HOLLYWOOD, FL 33021	Mailing Address 695 N. STATE ROAD 7 HOLLYWOOD, FL 33021
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DO NOT WRITE IN THIS SPACE



01102008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0056594	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BEVERLY JEAN OVIATT 8001 S.W. 7TH COURT NORTH LAUDERDALE, FL 33068
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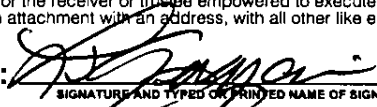
DO NOT WRITE IN THIS SPACE

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUTIERREZ, GERARDO 6136 MONROE ST. HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ESTRADA, ILEANA G 6136 MONROE ST. HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUAJARDO, LUIS 695 N. ST. RD. 7 HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUTIERREZ, ROMAN 695 N. ST. RD. 7 HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U000000785975 01/17/08-80022-010 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

12. 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 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>	1/14/08 954-966-9630 <small>Date Daytime Phone #</small>