

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000003259

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** THE GOLDEN WINGS PROJECT, INC.

**Current Principal Place of Business:**

9021 VICKROY TER  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

**Current Mailing Address:**

9021 VICKROY TER  
OVIEDO, FL 32765 US

**New Mailing Address:**

**FEI Number:** 45-1814018

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SIMMONS, KARIM S  
9021 VICKROY TER  
OVIEDO, FL 32765 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SIMMONS, KARIM S  
**Address:** 9021 VICKROY TER  
**City-St-Zip:** OVIEDO, FL 32765 US

**Title:** VP  
**Name:** SIMMONS, RAYMOND II  
**Address:** 151 MITCHELL RD APT. M-2  
**City-St-Zip:** GREENVILLE, SC 29615

**Title:** SEC  
**Name:** LEBRON, ZAHIRA T  
**Address:** JARDINES DE MONACO3 CALLE MONTE CARLOS 267  
**City-St-Zip:** MANTI, PR 00674 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** KARIM SIMMONS

P

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date