

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000003176

1. Entity Name

GOLDEN WINGS, INC.

Principal Place of Business

451 SE 13TH AVENUE  
POMPANO BEACH FL 33060

Mailing Address

451 SE 13TH AVENUE  
POMPANO BEACH FL 33060-7617

2. Principal Place of Business

580 NW 47TH TERRACE

Suite, Apt. #, etc.

DEERFIELD BEACH, FL

City & State

33442 USA

Zip

Country

3. Mailing Address

580 NW 47TH TERRACE

Suite, Apt. #, etc.

DEERFIELD BEACH, FL

City & State

33442 USA

Zip

Country

FILED  
Feb 21, 2000 8:00 am  
Secretary of State

02-21-2000 90004 004 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0404516

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BEAUPRE, JUDITH A  
451 SE 13TH AVENUE  
POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent

Name

BEAUPRE, JUDITH A.

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

580 NW 47TH TERRACE

DEERFIELD BEACH

City

FL

Zip Code

33442

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
WATERS, W J  
511 74TH STREET  
HOLMES BEACH FL 34217

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
JENKINS, EMILY  
3212 LAKEVIEW CIRCLE STE. 101  
FORT PIERCE FL 34949

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
BEAUPRE, JUDY  
451 SE 13TH AVENUE  
POMPANO BEACH FL 33060

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
MILLER, P  
2314 OLD NEW WINDSOR PIKE  
NEW WINDSOR MD

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
NEU, JOANN  
2131 NW 30TH ROAD  
BOCA RATON FL 33431

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
MCCARTHY, DAN  
62 DARLINGTON ROAD  
BEAVER FALLS PA 15010

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
BEAUPRE, JUDY  
580 NW 47TH TERRACE  
DEERFIELD BEACH, FL 33442

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

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 617, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/23/00 954-570-5309