

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000057911

FILED
Apr 21, 2004
Secretary of State

Entity Name: GOLDEN EAGLE DISTRIBUTORS INC.

Current Principal Place of Business:

11103 NW 7TH ST APT 203
MIAMI, FL 331723671

New Principal Place of Business:

859 KENTUCKY WOODS LN EAST
ORLANDO, FL 32824

Current Mailing Address:

11103 NW 7TH ST APT 203
MIAMI, FL 331723671

New Mailing Address:

859 KENTUCKY WOODS LN EAST
ORLANDO, FL 32824

FEI Number: 52-2248231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYES, RAFAEL L
11103 NW 7TH ST APT 203
MIAMI, FL 331723671

Name and Address of New Registered Agent:

REYES, RAFAEL L
859 KENTUCKY WOODS LN EAST
ORLANDO, FL 32824

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:

04/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REYES, RAFAEL L
Address: 11103 NW 7TH ST APT 203
City-St-Zip: MIAMI, FL 331723671

Title: V () Delete
Name: RODRIGUEZ, JENNIFER
Address: 11103 NW 7TH ST APT 203
City-St-Zip: MIAMI, FL 331723671

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REYES, RAFAEL L
Address: 859 KENTUCKY WOODS LN EAST
City-St-Zip: ORLANDO, FL 32824

Title: V (X) Change () Addition
Name: RODRIGUEZ, JENNIFER
Address: 333 SE DALVA AVE
City-St-Zip: PORT SAINT LUCIE, FL 34984

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAFAEL L REYES

PD

04/21/2004

Electronic Signature of Signing Officer or Director

Date