## France Contract

SIGNATURE:

## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 26, 2005 08:00 AM Secretary of State

DOCUMENT # P00000068849  1. Entity Name GOLDFINGER WORLDWIDE MANAGEMENT, INC.				Secretary of St	ate
Principal Place 1322 ALYCO CARLSBAD, (		Mailing Address 1322 ALYCON COURT CARLSBAD, CA 92009		T THE DIGHT HIS BELLE WHICH WHICH WAS BOOK ABOUT WHICH CHIEF CHIEF WHICH THINDS IN THE	II
DO NOT WRITE IN THIS SPACE				01132005 No Chg-P CR2E034 (10/03)  4. FEI Number	or
	C Name at Address of Comment	Davistan of Sant	<del>,</del>	Fee Required	
1200 S. P.	6. Name and Address of Current ORATION SYSTEM NE ISLAND RD. ION, FL 33324	Hegistered Agent		DO NOT WRITE IN THIS SPACE	
8. The above the obligat SIGNATURE	ions of registered agent.	-	red office or register ed Agent signature required	ered agent, or both, in the State of Florida. I am familiar with, and according to the state of Florida. I am familiar with, and according to the state of Florida. I am familiar with, and according to the state of Florida. I am familiar with, and according to the state of Florida. I am familiar with, and according to the state of Florida. I am familiar with, and according to the state of Florida. I am familiar with, and according to the state of Florida. I am familiar with, and according to the state of Florida. I am familiar with, and according to the state of Florida. I am familiar with and according to the state of Florida. I am familiar with and according to the state of Florida.	ept
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.	9. Election Campaign Fina Trust Fund Contribution.	ncing \$5.	5.00 May Be ided to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIF	ÖFFICERS AND PD PALUMBO, PHILIP R 1322 ALCYON COURT CARLSBAD, CA 92009	DIRECTORS		- UDNON0332764	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<del>-</del>		UDNOO0332764 	)
NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		to the second position of the second		international <u>was to the second of the seco</u>	
12. I hereby of indicated of the corchanged,	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emp or on an attachment with an address.	this filing does not qualify for the exe s true and accurate and that my signa owered to execute this report as requ with althother like empowered.	emption stated in Se sture shall have the s ired by Chapter 607	Section 119.07(3)(1). Florida Statutes. I further certify that the information is same legal effect as if made under oath; that I am an officer or director, Florida Statutes, and that my name appears in Block 10 or Block 1	on tor t if