

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P00000072531*

1. Entity Name

*GOLDEN HOUSE Group, INC*

FILED

04 MAY 19 PM 11:26

FLORIDA STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

600037434776

06/01/04--01006--014 \*\*600.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

*9300 N.W. 25 ST*

3. Mailing Address

Suite, Apt. #, etc.

*# 106*

Suite, Apt. #, etc.

City & State

*Miami, FL*

City & State

4. FEI Number

☒ Applied For

☐ Not Applicable

Zip

*33172*

Country

*USA*

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

*PAUL LOBAINA*

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

*9300 N.W. 25 ST*

City

*Miami*

FL

Zip Code

*33172*

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reissuing)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

*PAUL LOBAINA  
9300 N.W. 25 ST #106  
Miami, FL 33172*

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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13. 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 607, Florida Statutes, and that my name appears in Block 11 or on an attachment with an address, with all other officers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Typing Name

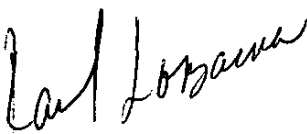
CR2E034B (12/01)

Division of Corporations  
P.O. BOX 6327  
Tallahassee, FL 32314

Per instructions from Division of Corporations, I am attaching a check in the amount of \$600.00 for the annual report fee with my application.

We did not receive the U.B.R. for the years 2001,2002,2003 and 2004 or any other notice from the Division of Corporations in respect with the Corporation **GOLDEN HOUSE GROUP, INC.**

Thank you for your courtesy in this matter.

A handwritten signature in cursive script, appearing to read "Raul Lobaina", written over a horizontal line.

**RAUL LOBAINA**  
**PRESIDENT**