

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

DOCUMENT # *P00000072531*
1. Entity Name
GOLDEN HOUSE Group, INC

FILED
04 MAY 19 PM 11:26
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <i>9300 N.W. 25 ST</i>		3. Mailing Address	
Suite, Apt. #, etc. <i># 106</i>		Suite, Apt. #, etc.	
City & State <i>Miami, FL</i>		City & State	
Zip <i>33172</i>	Country <i>USA</i>	Zip	Country

600037434776
*06/01/04--01006--014 **\$600.00*

DO NOT WRITE IN THIS SPACE

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						<input type="checkbox"/> Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
				7. Name and Address of Current Registered Agent		
Name <i>PAUL LOBAINA</i>		Street Address (P.O. Box Number is Not Acceptable)				
<i>9300 N.W. 25 ST</i>		City <i>Miami</i>				
		FL	Zip Code <i>33172</i>			

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 *Paul Lobaina*
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) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>PAUL LOBAINA</i> <i>9300 N.W. 25 ST #106</i> <i>Miami, FL 33172</i>	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 authorized 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: *Paul Lobaina*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone _____

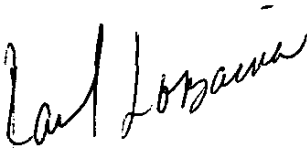
CF2E034B (12/01)

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.



RAUL LOBAINA
PRESIDENT