FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 27, 2001 8:00 am DOCUMENT # P00000106459 Secretary of State GOLDEN GLOBE CONSTRUCTION AND DEVELOPMENT, INC. 04-27-2001 90220 003 \*\*\*150.00 Principal Place of Business Mailing Address 1515 E DIANA STREET 1515 E DIANA STREET TAMPA FL 33610 TAMPA FL 33610 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FELNumber Applied For 52-2281 Not Applicable Zip 7in Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HAND, SUSAN M Street Address (P.O. Box Number is Not Acceptable) 1515 E DIANA STREET TAMPA FL 33610 Zip Code City FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. President/TREasurer CR2E034 (10/00) TITLE ☐ Delete TITLE MARCHING. Hand 1515 E. Diana St. HAND, MARTIN G NAME NAME 1515 E DIANA STREET STREET ADDRESS STREET ADDRESS TAMPA, Kla. 33610 CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33610** President/Treasure (1) Change ☐ Delete TITLE TITLE HAND, SUSAN M NAME NAME 1515 E DIANA STREET STREET ADDRESS 1515 E. Diane St STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33610** TAMPA, Fla. 33610 President Treasurer Martin G. Hand 1515 E. Dianast. TITLE ☐ Delete Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS TAMPA, FG. 336,0 CITY-ST-ZIP CITY-ST-ZIP Via President / Secretary TITLE ☐ Delete TITLE Change Addition Susan M. Hand NAME NAME 1515 EDiana St STREET ADDRESS STREET ADDRESS TAMPA, FLG. 33610 CITY-ST-ZIP CITY-ST-7iP Change TITLE □ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 Block 12 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 DIRECT

Susan H. Hand

04/20/01

(813) 238-4636

Daytime Phone