

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91455 003 ***150.00

0565897
AV

DOCUMENT # P01000010574

1. Entity Name

GOLDEN CONSTRUCTION, INC.



Principal Place of Business

**4223 PATTY WAY
SARASOTA FL 34232**

Mailing Address

**4223 PATTY WAY
SARASOTA FL 34232**

2. Principal Place of Business

8080 West Flagler Street

3. Mailing Address

8080 West Flagler Street

Suite, Apt. #, etc.

2C

Suite, Apt. #, etc.

2C

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33144

Country

USA

Zip

33144

Country

USA

4. FEI Number

65-1071166

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

CADELE, GUIDO

4009 CROCKERS LAKE BLVD

APT 1217

SARASOTA FL 34238

7. Name and Address of New Registered Agent

Name **CADELO, Guido**

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

8080 WEST FLAGLER STREET

Suite 2C

City **MIAMI**

FL

Zip Code

33144

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **CADELO, GUIDO**
STREET ADDRESS **4223 PATTY WAY**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **VPD** ☐ Delete
NAME **BUITRAGO, JUAN CARLOS**
STREET ADDRESS **13616 SW 114 LN**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE **TD** ☐ Delete
NAME **GUTIERREZ, URIEL**
STREET ADDRESS **13253 SW 110TH TERRACE APT 2**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **BUITRAGO, JUAN CARLOS**
STREET ADDRESS **13911 SW 108 STREET**
CITY-ST-ZIP **MIAMI, FL 33186**

TITLE **VPD** ☒ Change ☐ Addition
NAME **CADELO, GUIDO**
STREET ADDRESS **4223 PATTY WAY**
CITY-ST-ZIP **SARASOTA, FL 34232**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **GUTIERREZ, JOHN**
STREET ADDRESS **1990 BRICKELL AVE, APT 1**
CITY-ST-ZIP **MIAMI, FL 33129**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/24/03

305-260-9990

Date

Daytime Phone #

CR2E034 (10/02)