

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1052

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000011480

1. Corporation Name

GOLDEN EAST COAST ENTERPRISES INC.

2. Principal Office Address
12905 N. MIAMI AVENUE

Suite, Apt. #, etc.

City & State
N. MIAMI FL

Zip Country
33168 USA

3. Mailing Office Address
12905 N. MIAMI AVENUE

Suite, Apt. #, etc.

City & State
N. MIAMI FL

Zip Country
33168 USA

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000084094010
01/12/07--01003--020 **300.00

REINSTATEMENT 05-06

4. Date Incorporated or Qualified
To Do Business in Florida 01/31/2001

5. FEI Number
651074741

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MARIA LUNA

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

8001 N.W. 36 STREET

Suite, Apt. #, Etc.

100-C

City

MIAMI

State

FL

Zip Code

33166

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 01-02-07

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	JULIO MASSETTI	12905 N. MIAMI AVENUE	N. MIAMI, FL 33168

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/02/07

Date

305-310-4789

Daytime Phone #

3. Mitchell JAN 8 2007

20f2

January 02, 2007

Dear,
Florida Department of State, Division of Corporations.

This is a letter to inform you that GOLDEN EAST COAST ENTERPRISES, INC., has never received the ANNUAL REPORT 2005 and 2006.

Because when it was filed it had other address.

Enclosed please find check \$300.00

A handwritten signature in black ink, appearing to read "Julio Massetti", is written over the printed name.

Julio Massetti
President