

FILED
May 21, 2002 8:00 am
Secretary of State

04-11-2002 90002 040 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000017670

1. Entity Name
GOLDCROW, INC.

Principal Place of Business

2900 ITHACA CT.
 COCOA FL 32956

Mailing Address

2900 ITHACA CT.
 COCOA FL 32956

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3704075

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LERA, RICHARD D JR.
 2900 ITHACA CT.
 COCOA FL 32956

Name

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

City

FL

Zip Code

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

Richard D. Lera, Jr.
 Signature, typed or printed name of registered agent and title if applicable.

Richard D. Lera, Jr.

(NOTE: Registered Agent signature required when reinstating)

3/25/02

DATE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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	D	<input type="checkbox"/> Delete
NAME	LERA, RICHARD D JR.	
STREET ADDRESS	2900 ITHACA CT.	
CITY-ST-ZIP	COCOA FL 32956	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FOURNIER, RENE L	
STREET ADDRESS	560 WICKER RD. SW	
CITY-ST-ZIP	PALM BAY FL 32908	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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:

Richard D. Lera, Jr.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/02
 Date

(321) 243-6052
 Daytime Phone #

CR2E034 (9/01)