

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

5/7/2003-90166-008-\$150.00-\$150.00

FILED  
03 JUN -4 PM 1:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # *P01000034492*

1. Entity Name

GOLDEN BLUE INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
10901 FRONT BEACH RD.

3. Mailing Address  
10901 FRONT BEACH RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
PANAMA CITY BEACH, FLORIDA

City & State  
PANAMA CITY BEACH, FLORIDA

4. FEI Number  
59-3708513

Applied For  
Not Applicable

Zip  
32407

Country  
USA

Zip  
32407

Country  
USA

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name JONATHAN DETULLIO

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

10901 FRONT BEACH RD.

City PANAMA CITY BEACH

FL

Zip Code  
32407

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

January 1 - May 1: Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

*P/V/SIT*  
JONATHAN DETULLIO  
10901 FRONT BEACH RD.  
PANAMA CITY BEACH, FL 32407

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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**DO NOT WRITE  
IN THIS SPACE**

*b7E*

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Jonathan Detullio*

DETULLIO JONATHAN

5/6/03

(850) 624 8088

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20348 (12/02)