

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

014976 AV

04-23-2002 90374 008 ***150.00

DOCUMENT # P01000067595

1. Entity Name
GOLDEN ISLAND, INC.

Principal Place of Business

**7817 MAPLEWOOD
 SUITE #614
 MELBOURNE FL 32904**

Mailing Address

**7817 MAPLEWOOD
 SUITE #614
 MELBOURNE FL 32904**



2. Principal Place of Business

3. Mailing Address

3112 MANOR DR NE

3112 MANOR DR NE

DO NOT WRITE IN THIS SPACE

City & State
PALM BAY, FL.

City & State
PALM BAY, FL.

4. FEI Number
59-3140992

Applied For
 Not Applicable

Zip Country
32905 USA

Zip Country
32905 USA

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

**SABAGH, MOHAMMAD
 7817 MAPLEWOOD
 SUITE #614
 MELBOURNE FL 32904**

Name **HAITHAM TALEB**
 Street Address (P.O. Box Number is Not Acceptable)
3112 MANOR DR NE
 City **PALM BAY** FL Zip Code **32905**

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 **03-30-02**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
	PSTD	SABAGH, MOHAMMAD	7817 MAPLEWOOD SUITE #614 MELBOURNE FL 32904	<input checked="" type="checkbox"/>
	PSTD	HAITHAM TALEB		<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	P, S, T, D	HAITHAM TALEB	3112 MANOR DR. NE PALM BAY, FL. 32905	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	X	KHALID SEIDAN	VP 3112 MANOR DR NE PALM BAY, FL. 32905	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: **HAITHAM TALEB**
03-30-02 321-956-9952
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)