2004 FOR PROFIT CORPORATION ANNUAL REPORT					FILED May 04, 2004 8:00 am Secretary of State				
DOCUMENT # P01000077906 1. Entity Name GOLD HAND CORPORATION					05-04-2004 90121 031 ***150.00				
Principal Place of Business 13876 SW 56 ST. 11239 NW, 57 U #354 MIAMI, FL 33175	Mailing Address ANE 3244 S.W. 154TH CO 8 MIAMI, ED 33185	URT ( 12 MIA	239 WW,574 MI,FL33H	F		19370.	1 <b>6 6 1 1 1</b> 1		
2. Principal Place of Business	3. Mailing Address								
Suite, Apt. #. etc.	Suite. Apt. #, etc								
City & State	City & State			4. FEI Number Applied For 65-1127422 Not Applical					
Zip Country	Country Zip		try		e of Status Desired		75 Addi Required	tional	
6. Name and Address of Curren	······································		Name	7. Name an	d Address of New R				
DE MARCANO, ILDA D 3244 S.W.X154TH COURT MIAMI, FL 33185 MIAMI, FL 33185 MIAMI	2CANO,ILOA D. NW 57LANE .FL 83178	ILOA D. J <i>LANE</i> 3178		Street Address (P.O. Box Number is Not Acceptable)					
	,		City			FL <sup>z</sup>	lip Code		
<ol> <li>The above named entity submits this statement the obligations of registered agent.</li> </ol>	for the purpose of changing it	ts registere	ed office or regist	tered agent, or b	oth, in the State of Flo	<b>FL</b>			
SIGNATURE Signature, typed or printed name of registered age FILE NOWIII FEE.IS \$150.00 – After May 1, 2004 Fee will be \$550	9. Election Camp	aign Finan	~ <u> </u>	red when reinstating) 5.00 May Be dded to Fees		DATE			
1	OFFICERS AND DIRECTORS			ADDITIONS	/CHANGES TO OFFI				
NAME DE MARCANO, ILDA D STREET ADDRESS 3244 S.W. 154TH COURT CITY-ST-ZIP MIAMI, FL 33185	DE MARCANO, ILDA D 3244 S.W. 154TH COURT		ET ADDRESS ST - ZIP				hange	Addition	
STREET ADDRESS GITY-ST-ZIP: MIAMI, FL 33186	MARTINEZ, WAN E CLIMIN AIL BERE						Change	Addition	
IITLE VD NAME BETANCOURT, ALMARA STREET ADDRESS 13876 SW 56 ST. #354 CIY-ST-ZIP MIAMI, FL 33175	Delete HMINAR					/ 🗆 0	hange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·			~	C C	hange	Addition	
TITLE NAME STREET ADDRESS GITY-ST-ZIP	Delete	TITLE NAME STREE CITY-1	T ADDRESS			C C	hange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	CITY-	t address St-zip			_	hange	Addition	
<ol> <li>I hereby certify that the information supplied wi indicated on this report or supplemental report of the corporation or the receiver or trustee emi- changed, or on an attachment with an address</li> </ol>	s rue and accurate and that i powered to execute this report with all other like empowered	my signati t as require		e same legal effe 07. Florida Statuti	ot as if made under o es; and that my name	ath; that I am an appears in Bloc	officer o k 10 or E	r director Block 11 lf	
SIGNATURE: VCAL AU SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICER	OR DIRECTO	DR	APPEIL, J	9,2004 Date	786 Daytime P	- <u>331</u>	7971	