

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000082618

1. Entity Name
GOLDE'S TOUCH CARPENTRY, INC.

Principal Place of Business
9601 MAJESTIC WAY
BOYNTON BEACH FL 33436

Mailing Address
9601 MAJESTIC WAY
BOYNTON BEACH FL 33436

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-3823290

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

GOLDE, WARREN
9601 MAJESTIC WAY
BOYNTON BEACH FL 33436

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 *Warren Golde*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/15/02

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

☐ Delete

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CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change

☒ Addition

President
Warren Golde
9601 Majestic Way
Boynton Beach, FL 33437

☐ Change

☒ Addition

Secretary
Laura Golde
9601 Majestic Way
Boynton Beach, FL 33437

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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: *Warren Golde*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/15/02 (561)
742-4985

Daytime Phone

CR2E034 (9/01)

FILED
Jun 11, 2002 8:00 am
Secretary of State

05-13-2002 90121 034 ***155.00



DO NOT WRITE IN THIS SPACE