2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR P01000098888 DOCUMENT

1. Entity Name GOLD MEDAL TREES, INC.



Principal Place of Business 16901 SW 256 STREET HOMESTEAD FL 33031

Zip

SIGNATURE

Mailing Address 16901 SW 256 STREET HOMESTEAD FL 33031

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

FILED

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

6. Name and Address of Current Registered Agent WEBER-RASKIN, KATHLEEN M

Country

9990 SW 77 AVE STE 311 MIAMI FL 33156.

| 5. Certificate of Status Desired | \$ |
|----------------------------------|----|

4. FEI Number 0067419

8.75 Additional ee Required

Applied For

Not Applicable

| Name | | |
|--|--|---|
| Street Address (P.O. Box Number is Not Acceptable) | | |
| | - 17-17-17-17-17-17-17-17-17-17-17-17-17-1 | • |
| City | Zip Code | |

7. Name and Address of New Registered Agent

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.

Country

Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change ☐ Addition TITLE ☐ Delete TITLE SARRIA, CARLOS M NAME NAME 16901 SW 256 STREET STREET ADDRESS STREET ADDRESS HOMESTEAD FL 33031 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change . ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Cbarroe ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 Block 11 if changed, or on an attachment with an address

SIGNATURE:



16901 S.W. 256 STREET HOMESTEAD, FL 33031 (305) 248-1779 FAX: (305) 248-3239 TOLL FREE: (888) 278-6220 CARLOS' CELL: 786-473-4717

April 7, 2003

Michele Milligan
Divisions of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Dear-Michele,

As per four telephone conversation today, please apply last years payments for Gold Medal Growers, Inc. and Gold Medal Trees, Inc. to these 2003 reports. If you need any further information or have any questions please feel free to contact me at 305-248-1779 or 888-278-6220.

Thank you so much for your attention to these matters.

Sincerely,

Aleida Vale Office Manager

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AV/av