

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90025 025 ***150.00

DOCUMENT # P02000068957

1. Entity Name
GOLDEN EYE PRODUCTIONS, INC.



Principal Place of Business Mailing Address
9506 S RED ROAD 4610 SW 166 AVE 9506 S RED ROAD 4610 SW 166 AVE
MIAMI, FL 33156 S.W. Ranches, FL. MIAMI, FL 33156 SW Ranches, FL
33331 33331

34048026



02112004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-4203356 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

OESTERLE DOUGLAS W. Ralph N. Bellman
9506 S RED ROAD 4610 SW 166 AVE
MIAMI, FL 33156 SW Ranches, FL
33331

**DO NOT WRITE
IN THIS SPACE**

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: Ralph N. Bellman Pres. 03-22-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BELLMAN, RALPH N
STREET ADDRESS	9506 S RED ROAD
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	HAKAN KARLSSON
NAME	4610 SW 166 AVE
STREET ADDRESS	SW RANCHES, FL 33331
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ralph Bellman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-22-04 954-593-0477
Date Daytime Phone #