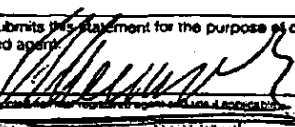
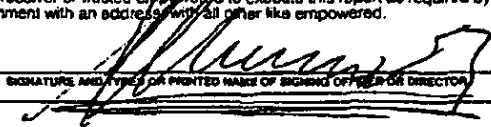


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

4/21/04  
4

**FILED**  
**Jun 07, 2004 8:00 am**  
**Secretary of State**

04-21-2004 90084 015 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                       |                                                                                                                  |                                                                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # P03000073832</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                       |                                 |                                                                   |
| 1. Entity Name<br><b>GOLDEAGLE 2003, CORPORATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                       |                                                                                                                  |                                                                   |
| Principal Place of Business<br><b>301 E ROYAL PALM RD STE 2E<br/>BOCA RATON FL 33432</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                       | Mailing Address<br><b>301 E ROYAL PALM RD STE 2E<br/>BOCA RATON FL 33432</b>                                     |                                                                   |
| 2. Principal Place of Business<br><b>431 W. CAMINO REAL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                       | 3. Mailing Address<br><b>431 W. Camino Real</b>                                                                  |                                                                   |
| Suite, Apt. #, etc.<br><b>Suite 3</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                       | Suite, Apt. #, etc.<br><b>Suite 3</b>                                                                            |                                                                   |
| City & State<br><b>BOCA RATON FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                       | City & State<br><b>BOCA RATON FL</b>                                                                             |                                                                   |
| Zip<br><b>33432</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Country<br><b>FLORIDA</b>                                                                             | Zip<br><b>33432</b>                                                                                              | Country<br><b>FLORIDA</b>                                         |
| 6. Name and Address of Current Registered Agent<br><b>SOSA, MARIA<br/>301 E ROYAL PALM RD STE 2E<br/>BOCA RATON FL 33432</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                       | 7. Name and Address of New Registered Agent<br><b>SOSA, MARIA<br/>431 W. CAMINO REAL<br/>BOCA RATON FL 33432</b> |                                                                   |
| 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.                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                       | 4. FEI Number<br><b>66426984</b>                                                                                 |                                                                   |
| SIGNATURE<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                       | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                         |                                                                   |
| FILE NOW!! FEE IS \$150.00<br>After May 1, 2004 Fee will be \$550.00<br>Make Check Payable to Florida Department of State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                       | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees     |                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                       | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                            |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | P<br>SOSA, MARIA<br>431 W CAMINO REAL AP 3<br>BOCA RATON FL 33432                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | D<br>CAMPOS, GEORGE<br>301 E ROYAL PALM RD STE 2E<br>BOCA RATON FL 33432                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>HUGO ROSSI</b><br><b>SECRETARY</b><br><b>431 W. CAMINO REAL, S#3</b><br><b>BOCA RATON FL 33432</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                       | Date: <b>April 16, 2004</b> / 5617391-4698                                                                       |                                                                   |