


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90840 020 ***150.00

DOCUMENT # P04000040423	
1. Entity Name GOL HOLDINGS CORPORATION	

Principal Place of Business ATTN: MARK M KAMP, GENERAL COUNSEL 5500 NORTH VILLAGE BOULEVARD, SUITE 202 WEST PALM BEACH, FL 33407	Mailing Address ATTN: MARK M KAMP, GENERAL COUNSEL 5500 NORTH VILLAGE BOULEVARD, SUITE 202 WEST PALM BEACH, FL 33407
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2. Principal Place of Business - No P.O. Box # 5500 Village Blvd	3. Mailing Address 5500 Village Blvd.
Suite, Apt. #, etc. LEGAL - Suite 202	Suite, Apt. #, etc. LEGAL - Suite 202
City & State West Palm Beach, FL	City & State West
Zip 33407	Country USA

400000101



04122007 Chg-P CR2E034 (12/06)

4. FEI Number 20-0822146	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KAMP, MARK M ESQ 5500 VILLAGE BOULEVARD SUITE 202 WEST PALM BEACH, FL 33407

7. Name and Address of New Registered Agent	
Name Shari Gottesman, Esq.	
Street Address (P.O. Box Number is Not Acceptable) 5500 Village Blvd	
Suite, Apt. #, etc. Suite 202	
City West Palm Beach	Zip Code FL 33407

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 Shari Gottesman, Esq. Assistant General Counsel DATE 4/12/07

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST RUBIN, JORDAN S 5500 NORTH VILLAGE BOULEVARD, SUITE 202 WEST PALM BEACH, FL 33407 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: John S. Rubin DATE 4/24/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR