2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000115711

1. Entity Name
GOLDEN SECRET INVESTMENT, INC.

FILED
07 AUG 10 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
701 NE 17 CT. FT. LAUDERDALE, FL 33305	701 NE 17 CT. FT. LAUDERDALE, FL 33305

08092007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5575 NW. 36 ST	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Miami	
City & State FL.	City & State
Zip 33166 Country USA	Zip Country

4. FEI Number 34-2009578 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GONZALEZ-GORT, VICENTE
335 S. BISCAYNE BLVD.
E. TOWER STE. 3009
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name CECILIO R. MATIAS

Street Address (P.O. Box Number is Not Acceptable)
5575 NW 36 st

City Miami FL Zip Code 33166

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 _____ DATE 08/09/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 14, 2007

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD MATIAS, CECILIO 335 S. BISCAYNE BLVD. E TOWER., STE 3009 MIAMI, FL 33131 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. JORGE OJEDA ☐ Change ☒ Addition 5575 NW 36 st Miami FL, 33166
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GONZALEZ-GORT, VINCENTE 335 S. BISCAYNE BLVD. E. TOWER., STE 3009 MIAMI, FL 33131 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. NORBERTO LAZARO ALFREDO ☐ Change ☒ Addition 5575 NW 36 ST Miami FL 33166
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ALOM, ALBERTO 335 S. BISCAYNE BLVD. E. TOWER., STE 3009 MIAMI, FL 33131 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 7/28/10
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CUELLAR, EVIAN 10364 FAIRWAY HEIGHTS BLVD. MIAMI, FL 331571559 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 000108026350 08/14/07--01010--014 **150.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: _____ 08/09/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #