


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

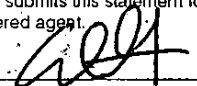
**FILED**  
**Mar 24, 2005 8:00 am**  
**Secretary of State**

03-24-2005 90037 045 \*\*\*150.00

<b>DOCUMENT # P04000131080</b>			
1. Entity Name <b>GOLD STAR DESIGN HOUSE, INC.</b>			
Principal Place of Business <b>3482 PINE HAVEN CIRCLE BOCA RATON FL 33431</b>		Mailing Address <b>11578 BIG SKY CT. BOCA RATON FL 33498</b>	
2. Principal Place of Business <b>11578 BIGSKY CT</b>		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>BOCA RATON, FL</b>		City & State	
Zip <b>33498</b>	Country <b>USA</b>	Zip	Country
4. FEI Number <b>56-2484534</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	



1st MOORE CR2E034 (10/04)

6. Name and Address of Current Registered Agent  <b>MERZEL, DAVID 3482 PINE HAVEN CIRCLE BOCA RATON FL 33431</b>		7. Name and Address of New Registered Agent Name <b>ANDREW GLODSTEIN</b> Street Address (P.O. Box Number is Not Acceptable) <b>11578 BIG SKY CT</b> City <b>BOCA RATON</b> FL <b>33498</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.			
SIGNATURE 		DATE <b>3/18/05</b>	
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)	

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> 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	P GLODSTEIN, ANDREW M 3482 PINE HAVEN CIRCLE BOCA RATON FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANDREW GLODSTEIN 11578 BIG SKY CT BOCA RATON, FL 33498 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS 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)(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:  **ANDREW GLODSTEIN, PRES. 1/21/05**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #