

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000131284

Entity Name: GOAL ADVERTISING, INC.

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

400 ALHAMBRA CIRCLE
1
CORAL GABLES, FL 33134

Current Mailing Address:

400 ALHAMBRA CIRCLE
1
CORAL GABLES, FL 33134

New Principal Place of Business:

4560 NW 107 AVE
STE # 107
DORAL, FL 33178

New Mailing Address:

4560 NW 107 AVE
STE # 107
DORAL, FL 33178

FEI Number: 75-3168270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAZZA-MARTINEZ, TANIA A MS.
9130 SOUTH DADELAND BLVD.
1600
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

GILIBERTI, MARIA G MS.
4560 NW 107 AVE
STE # 107
DORAL, FL 33178 US

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.

SIGNATURE: MS. MARIA G. GILIBERTI

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: GILIBERTI, MARIA G
Address: 400 ALHAMBRA CIRCLE SUITE 1
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D () Delete
Name: GILIBERTI, MARIA G MS.
Address: 400 ALHAMBRA CIRCLE SUITE 1
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VPD (X) Delete
Name: CARRIERI, ALESSANDRA M
Address: 400 ALHAMBRA CIRCLE STE #1
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: GILIBERTI, MARIA G MS.
Address: 4560 NW 107 AVE STE # 107
City-St-Zip: DORAL, FL 33178 US

Title: VPD (X) Change () Addition
Name: CARRIERI, ALESSANDRA M MS.
Address: 4560 NW 107 AVE STE # 107
City-St-Zip: DORAL, FL 33178 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MS. MARIA G. GILIBERTI

PSD

01/13/2009

Electronic Signature of Signing Officer or Director

Date