

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138586

Entity Name: GOLDEN PLAZA OF MIAMI, INC.

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

TEN ARAGON AVENUE
707
CORAL GABLES, FL 33134

Current Mailing Address:

TEN ARAGON AVENUE
707
CORAL GABLES, FL 33134

New Principal Place of Business:

ONE ALHAMBRA CIRCLE
404
CORAL GABLES, FL 33134

New Mailing Address:

1581 BRICKELL AVE.
1402
MIAMI, FL 33129

FEI Number: 83-0408347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUBE, ELIDE
TEN ARAGON AVENUE
707
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

KUVE, ALEXA
1581 BRICKELL AVE.
1402
MIAMI, FL 33129 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: ALEXA KUVE

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: KUBE, SALOMON
Address: TEN ARAGON AVENUE #707
City-St-Zip: CORAL GABLES, FL 33134

Title: PRES () Delete
Name: RODRIGUEZ, LINDA
Address: TEN ARAGON AVENUE #707
City-St-Zip: CORAL GABLES, FL 33134

Title: VP () Delete
Name: KUBE, ELIDE
Address: TEN ARAGON AVENUE #707
City-St-Zip: CORAL GABLES, FL 33134

Title: SECR () Delete
Name: KUBE, REYNALDO
Address: TEN ARAGON AVENUE #707
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LEON, YVETTE
Address: ONE ALHAMBRA CIRCLE #404
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: RODRIGUEZ, LINDA
Address: TEN ARAGON AVENUE #707
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: KUBE, SALOMON
Address: TEN ARAGON AVENUE #707
City-St-Zip: CORAL GABLES, FL 33134

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: YVETTE LEON

PRES

01/19/2009

Electronic Signature of Signing Officer or Director

Date