2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000144167

1. Entity Name

GOLDEN SPIKE COMBINATION CATERING, INC.



U00000557236

FILED

May 01, 2006 08:00 AN Secretary of State

CR2E034 (11/05)



Principal Place of Business

1971 NE 32ND ST. LIGHTHOUSE POINT, FL 33064 Mailing Address 1971 NE 32ND ST. LIGHTHOUSE POINT, FL 33064

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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Applied For 4. FEI Number 20-1830602 Not Applicable

\$8.75 Additional 5. Certificate of Status Desired Fee Required

GARNEAU, JOHN 1971 NE 32ND ST. LIGHTHOUSE POINT, FL 33064

DO NOT WRITE IN THIS SPACE

No Chg-P

04252006

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| 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when retinatating) DATE | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | 9. Election Campaign Finar Trust Fund Contribution. | \$5.00 May Be | | | | | |
| 10. OFFICERS AND DI | RECTORS | | | | | | |
| NAME GARNEAU, JOHN STREET ADDRESS 1971 NE 32ND ST. CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064 | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| TITLE NAME STREET ADDRESS CRY-ST-ZIP | | DO | NOT WRITE | | | | |
| TITLE NAME STREET ADDRESS GNY-ST-ZIP | | IN 1 | THIS SPACE | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| TITLE MAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| 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. | | | | | | | |

Wes.