

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000026678

Entity Name: GOLDLEND, INC

FILED
Jul 16, 2007
Secretary of State

Current Principal Place of Business:

3600 S. STATE ROAD 7(441)
SUITE 246
MIRAMAR, FL 320235289 US

New Principal Place of Business:

Current Mailing Address:

3600 S. STATE ROAD 7(441)
SUITE 246
MIRAMAR, FL 320235289 US

New Mailing Address:

FEI Number: 30-0298439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROADTRADING GROUP, INC
1034 N.E 209 TERRACE
N. MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: TOUSSAINT, HERMITE
Address: 3600 S. STATE ROAD 7 (441), STE 246
City-St-Zip: MIRAMAR, FL 330235289 US

Title: PR () Delete
Name: ROMANES, DESPEINES
Address: 3600 S. STATE ROAD 7 (441), STE 246
City-St-Zip: MIRAMAR, FL 330235289

Title: P () Delete
Name: DESPEINES, ROMANES
Address: 3600 S STATE ROAD 7 (441), STE 246
City-St-Zip: MIRAMAR, FL 330235289

Title: T (X) Delete
Name: ALUC, GINETTE
Address: 1600 N.E 172 ST
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: BR (X) Delete
Name: JEAN-BAPTISTE, BELLO
Address: 3600 S. SR7 SUITE 246
City-St-Zip: MIRAMAR, FL 33023

Title: BR (X) Delete
Name: DOMOND-BADAUD, RICHEMONDE
Address: 3600 S. SR7 SUITE 246
City-St-Zip: MIRAMAR, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: ROMANES DESPEINES

PR

07/16/2007

Electronic Signature of Signing Officer or Director

Date