

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2006 8:00 am
Secretary of State

05-19-2006 90031 043 ***150.00

DOCUMENT # P05000033104

1. Entity Name
M. GOLDEN COLLECTION, INC.



Principal Place of Business
**36 NE 1ST STREET
953
MIAMI, FL 33132**

Mailing Address
**19503 SW 39 STREET
MIRAMAR, FL 33029**

50019658



2. Principal Place of Business
755 NW 72 Ave

3. Mailing Address
Suite, Apt. #, etc.

Lobby - Plaza 12

Suite, Apt. #, etc.

**City & State
Miami, FL**

City & State

**Zip
33126**

Zip

Country

05162006 Chg-P CR2E034 (11/05)

4. FEI Number
20-2423501

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CASTAÑEDA, MARLENE
19503 SW 39 STREET
MIRAMAR, FL 33029**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P,VP
CASTAÑEDA, MARLENE
19503 SW 39TH STREET
MIRAMAR, FL 33029** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE: *Marlene Castañeda*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/16/06 305 267 6800
Date Daytime Phone #

ATTACHMENT

500/96 58

M. GOLDEN COLLECTION, INC.

735 NW 72 AVENUE
LOBBY-PLAZA 11
Miami, FL 33126
305-267-6800

05/16/2006

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

RE: M Golden Collection, Inc.

Doc #P05000033104

FEI #20-2423501

Dear Sir/Madam:

This is to inform you that we had not received the annual report form year 2006 due to the fact that you have the wrong address in your records, please waive the fees since I assumed my report was filed on time.

These instructions were given to me by phone today by: Mr. Michelle Milligan please find enclosed the report and check for the year 2006 for the amount of \$150.00

Sincerely,

M. Marlene Castañeda

Marlene Castañeda
President