2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000025755

1. Entity Name

GOLDEN MEMORIES BY HAZEL, CORP.



Principal Place of Business

Mailing Address

9980 SW 156TH TERRACE MIAMI, FL 33157 9980 SW 156TH TERRACE MIAMI, FL 33157

FILED Mar 06, 2008 8:00 am Secretary of State

03-06-2008 90039 024 ***150.00

LUFESUUD



DO NOT WRITE IN THIS SPACE

01312008

4. FEI Number		Applied For
20-4353513		Not Applicable
	_ \$8.	75 Additional

5. Certificate of Status Desired

\$8.75 Addition Fee Required

Daytime Phone #

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

GUTIERREZ, HAZEL 9980 SW 156TH TERRACE MIAMI, FL 33157

SIGNATURE: >

DO NOT WRITE IN THIS SPACE

No Chg-P

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							
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.		ing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS					
TITLE NAMÉ STREET ADDRESS CITY-ST-ZIP	P GUTIERREZ, HAZEL 9980 SW 156TH TERRACE MIAMI, FL 33157						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				4			
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.							

OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN