


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2007 8:00 am
Secretary of State

07-09-2007 90050 035 ***158.75

DOCUMENT # P06000069141	
1. Entity Name BLYGOLD REAL ESTATE, INC.	

Principal Place of Business 212 N. FEDERAL HWY 105 DANIA BEACH, FL 33004--282	Mailing Address 212 N. FEDERAL HWY 105 DANIA BEACH, FL 33004--282
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2. Principal Place of Business - No P.O. Box # 101 S.W. 15th Street	3. Mailing Address P.O. Box 22894
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Fort lauderdale, FL	City & State Fort lauderdale, FL
Zip 33315	Zip 33335-2894
Country U.S.A.	Country U.S.A.

40123000



07032007 Chg-P CR2E034 (12/06)

4. FEI Number 20-4896348	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BARRINGTON G. COOMBS & ASSOCIATES, PA 3500 N. STATE ROAD 7 464 LAUDERDALE LAKES, FL 33319	
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7. Name and Address of New Registered Agent	
Name Dayanita Koffie	
Street Address (P.O. Box Number is Not Acceptable) 101 S.W. 15th Street	
City Fort lauderdale	FL
Zip Code 33315	

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 Dayanita Koffie Treasurer 7/03/07
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 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE President (P)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BLEIJENBERG, RIJK		NAME Rijk Bleijenberg	
STREET ADDRESS 212 N. FEDERAL HWY, SUITE 105		STREET ADDRESS 101 S.W. 15th Street	
CITY-ST-ZIP DANIA BEACH, FL 33004-282		CITY-ST-ZIP Fort lauderdale, FL 33315	
TITLE 	<input type="checkbox"/> Delete	TITLE Vice president (V)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME 		NAME J. van Kranenburg	
STREET ADDRESS 		STREET ADDRESS 101 S.W. 15th Street	
CITY-ST-ZIP 		CITY-ST-ZIP Fort lauderdale, FL 33315	
TITLE 	<input type="checkbox"/> Delete	TITLE Treasurer (T)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME 		NAME Dayanita Koffie	
STREET ADDRESS 		STREET ADDRESS 101 S.W. 15th Street	
CITY-ST-ZIP 		CITY-ST-ZIP Fort lauderdale, FL 33315	
TITLE 	<input type="checkbox"/> Delete	TITLE Secretary (S)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME 		NAME Pieter van der Vlist	
STREET ADDRESS 		STREET ADDRESS 101 S.W. 15th Street	
CITY-ST-ZIP 		CITY-ST-ZIP Fort lauderdale, FL 33315	
TITLE 	<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-ST-ZIP 		CITY-ST-ZIP 	
TITLE 	<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-ST-ZIP 		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.

SIGNATURE: Dayanita Koffie 7/03/07 954-769-9511
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #