

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000087623

Entity Name: GOLDEN ARROW, INC.

FILED
Jan 30, 2008
Secretary of State

Current Principal Place of Business:

23041 SOUTHWEST 107TH AVENUE
MIAMI, FL 33170

New Principal Place of Business:

1531 NW 41 COURT
FT LAUDERDALE, FL 33309

Current Mailing Address:

23041 SOUTHWEST 107TH AVENUE
MIAMI, FL 33170

New Mailing Address:

1531 NW 41 COURT
FT LAUDERDALE, FL 33309

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

CAPE COD MANAGEMENT SVC INC
314 NE 27TH STREET
WILTON MANORS, FL 33334 US

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: APRIL CONDRON

01/30/2008

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: YOUSSEF, SALAH
Address: 23041 SOUTHWEST 107TH AVENUE
City-St-Zip: MIAMI, FL 33170

Title: DVT () Delete
Name: OMMARWAGAD, OMMAR H
Address: 23041 SOUTHWEST 107TH AVENUE
City-St-Zip: MIAMI, FL 33170

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: MAHAMOUD, MUTASSIN M
Address: 1531 NW 41 COURT
City-St-Zip: FT LAUDERDALE, FL 33309

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: MUTASSIN M MAHAMOUD

DPS

01/30/2008

Electronic Signature of Signing Officer or Director

Date