2007 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 14, 2007 8:00 am Secretary of State 08-14-2007 90007 040 ***158.75 **DOCUMENT # P06000154832** HOLDING GOLDEN INVESTMENTS, INC. 4U16V~~ Mailing Address Principal Place of Business 2810 ALTON DRIVE 2810 ALTON DRIVE KISSIMMEE, FL 34741 KISSIMMEE, FL 34741 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07102007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 20-8372185 Not Applicable Country Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TSE, ALBERTO J Street Address (P.O. Box Number is Not Acceptable) 2810 ALTON DRIVE KISSIMMEE, FL 34741 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 DATE Supervise typed or project name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 14, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS PD ☐ Change ☐ Addition TITLE ☐ Delete TITLE TSE, ALBERTO J NAME NAME STREET ADDRESS STREET ADDRESS 2810 ALTON DRIVE CITY-ST-ZIP KISSIMMEE, FL 34741 CITY-ST-ZIP DILLE VΡ ☐ Delete TITLE Change Addition TSE, TIN SUNG NAME NAME 2810 ALTON DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE, FL 34741 Change Addition ☐ Delete TITLE TITLE TSE, ISAVEL NAME NAME 2810 ALTON DRIVE STREET ADDRESS STREET ADDRESS KISSIMMEE, FL 34741 CITY-ST-ZIP CITY-ST-ZIP ☐ Channe Addition HILLE Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

FILED

- ALBERTO J. TSE - PRES 321-250-0417 SIGNATURE: URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

firess, with all other like empowered.

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12. I hereby certify that the information supplied with this filling 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

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changed, or on an attachme