

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000092672

Entity Name: GOLDEN KEY PLAZA III, INC.

FILED  
Feb 12, 2009  
Secretary of State

## Current Principal Place of Business:

230 174TH STREET  
#2209  
SUNNY ISLES BEACH, F; 33160

## New Principal Place of Business:

650 S FEDERAL HWY  
HOLLYWOOD, FL 33020

## Current Mailing Address:

230 174TH STREET  
#2209  
SUNNY ISLES BEACH, F; 33160

## New Mailing Address:

230 174TH STREET  
#2209  
SUNNY ISLES BEACH, FL 33160

FEI Number: 26-3549792

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHAPIRO, IRA R  
16375 NORTHEAST 18TH AVENUE  
SUITE 235  
NORTH MIAM BEACH, FL 33162 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SHUTOV, LEONID  
Address: 230 174TH STREET #2209  
City-St-Zip: SUNNY ISLES BEACH, F; 33160

Title: D ( ) Delete  
Name: SHUTOV, ITTA  
Address: 230 174TH STREET #2209  
City-St-Zip: SUNNY ISLES BEACH, F; 33160

Title: D ( ) Delete  
Name: SERDYUK, VIKTORIA  
Address: 244 KENWOOD AVENUE  
City-St-Zip: STATEN ISLAND, NY 10312

Title: D ( ) Delete  
Name: GORODETSKY, IGOR  
Address: 244 KENWOOD AVENUE  
City-St-Zip: STATEN ISLAND, NY 10312

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SHUTOV, LEONID  
Address: 230 174TH STREET #2209  
City-St-Zip: SUNNY ISLES BEACH, F; 33160

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SHUTOV LEONID

P

02/12/2009

Electronic Signature of Signing Officer or Director

Date