

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000066664

FILED  
Jan 18, 2011  
Secretary of State

Entity Name: GLLD-KOUHANA'S FAMILY, INC.

**Current Principal Place of Business:**

92 STREET CALLELONGUE, BUILDING  
RESIDENCE THE KNIGHT LANCELOT  
MARSEILLE, FR 13008 FR

**New Principal Place of Business:**

**Current Mailing Address:**

92 STREET CALLELONGUE, BUILDING  
RESIDENCE THE KNIGHT LANCELOT  
MARSEILLE, FR 13008 FR

**New Mailing Address:**

FEI Number: 27-4060092

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SALVATORI, WOOD & BUCKEL, PL  
9132 STRADA PLACE  
FOURTH FLOOR  
NAPLES, FL 34108 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

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: KOUHANA, GUY A  
Address: 92 STREET CALLELONGUE, BUILDING  
City-St-Zip: RES KNT LANCELOT MARSEILLE, FR 13008 FR

Title: VP  
Name: KOUHANA, LINDA  
Address: 92 STREET CALLELONGUE, BUILDING  
City-St-Zip: RES KNT LANCELOT MARSEILLE, FR 13008 FR

I hereby 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 all other like empowered.

SIGNATURE: GUY A. KOUHANA

PST

01/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date