2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000063446

Entity Name: A.N.B. GOLD, INCORPORATED

FILED Apr 29, 2012 Secretary of State

| Current Principal Place of Business: | | | New Principal Place o | New Principal Place of Business: | |
|---|----------|---------------------------------|-----------------------------------|---|--|
| 21700 SW 157 AVE | NUE | | | | |
| MIAMI, FL 33170 | US | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 21700 SW 157 AVE | NUE | | | | |
| 2B MIAMI, FL 33170 | US | | | | |
| FEI Number: | | FEI Number Applied For (X) | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| SEGUE TITLE RESO 1535 W HARMONY DAVIE, FL 33324 | | | | | |
| The above named e in the State of Florid | | bmits this statement for the pu | urpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | | |
| Ele | ectronic | Signature of Registered Ager | nt | Date | |
| | | | | | |
| | | | | | |

OFFICERS AND DIRECTORS:

Title: DPS

 Name:
 BARDINO, HECTOR

 Address:
 21700 SW 157 AVENUE

 City-St-Zip:
 MIAMI, FL 33170 US

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: HECTOR BARDINO DPS 04/29/2012