## Aug 11, 2006 8:00 am Secretary of State 2006 FOR PROFIT CORPORATION **ANNUAL REPORT** 08-11-2006 90074 001 \*\*\*\*50.00 DOCUMENT # P92000010722 08-11-2006 90074 002 \*\*\*500.00 GOLDEN PROPERTIES, INC. Principal Place of Business 66022370 Mailing Address 1528 S. DIXIE HWY 1528 S. DIXIE HWY POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060 2460-A 2. Principal Place of Business 2460-A N. State Road Seven 2460-A N. State Road Seven Suite. Apt. #, etc. Suite, Apt. #, etc. 08072006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For Landerdale Laker anderstell take α. 65-0374001 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 33313 33313 <u>us4</u> usA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Prince A. Donnahoe TV. DONNAHOE, PRINCE A IV, ESQ Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD 470 PLANTATION, FL 33324 S. University Prive, #210 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, typed or printed name of registered agent and title diapplicable FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 6, 2006 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DST , S, T, D, VP TITLE Delete TITLE Change Change ☐ Addition LABIDOU, MARC NAME NAME Joseph F. Kabidou STREET ADDRESS 1528 S. DIXIE HWY STREET ADDRESS 2460-A N. STATE ROLD SEVEN CITY ST-ZIP POMPANO BEACH, FL 33060 CITY-ST-ZIP Landerdale Laker FL. 33313 P,VP Delete TITLE ☐ Change Addition LABIDOU, MARC NAME NAME STREET ADDRESS 1528 S. DIXIE HIGHWAY STREET ADDRESS CITY ST-ZIP POMPANO BEACH, FL 33060 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental poor 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 endowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an oddress, with all other like empowered.

SIGNATURE: X

SIGNATURE AND PRED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**