2004 FOR PROFIT CORPORATION

Apr 02, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P92000013522 1. Entity Name GOLD MEDAL OF MIAMI CORP. Principal Place of Business Mailing Address 5035 EAST 4TH AVE 5035 EAST 4TH AVE HIALEAH, FL 33013 HIALEAH, FL 33013 US 03162004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0377425 Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BAROUH, ALBERTO 9260 SW 72ND ST SUITE 206 IN THIS SPACE MIAMI, FL 33173 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 Signature, typod or printed name of registered agent and life if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. HILE HERNANDEZ, ISIDRO NAME 5035 E 4 AVE STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33013 U0U000101646 TESF 04/02/04-80021-020 150.00 NAME STREET ADORESS CITY-ST-ZIP ПŒ STREET ADDRESS DO NOT WRITE CffY-SI-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CMY-ST-7IP 孤氏 NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 oats; 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-7IP mil NAME STREET ADDRESS CRY-ST-ZIP

FILED