

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000015118 (2)
1. Corporation Name
GOLDEN ACCOUNTING AND COMPUTER SERVICES, INC.



Principal Place of Business

Mailing Address

11217 SW 88 ST
APT C204
MIAMI FL 33176

9451 S.W. 164 Court
Miami FL 33196

11217 SW 88 ST
APT C204
MIAMI FL 33176

9451 S.W. 164 Court
Miami FL 33196

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 9451 S.W. 164 Court
Suite, Apt. #, etc.

22

23 Miami, Florida
City & State

24 33196 U.S.A.
Zip Country

2a. Mailing Address

25 9451 S.W. 164 Court
Suite, Apt. #, etc.

27

28 Miami Florida
City & State

29 33196 U.S.A.
Zip Country

3. Date Incorporated or Qualified

12/30/1992

4. FEI Number

65-0395394

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CENTENO, JUAN M
11217 SW 88 ST
APT C204
MIAMI FL 33176

9451 S.W. 164 Court
Miami FL 33196

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	CENTENO, JUAN M
STREET ADDRESS	11217 SW 88 ST #C204
CITY-ST-ZIP	MIAMI FL 33176
TITLE	VD <input type="checkbox"/> DELETE
NAME	CENTENO, MARTHA A
STREET ADDRESS	11217 SW 88 ST #C204
CITY-ST-ZIP	MIAMI FL 33176
TITLE	VD <input type="checkbox"/> DELETE
NAME	CENTENO, MANUEL A
STREET ADDRESS	11217 SW 88 ST #C204
CITY-ST-ZIP	MIAMI FL 33176
TITLE	VD <input type="checkbox"/> DELETE
NAME	CENTENO, JUSTINO A
STREET ADDRESS	11217 SW 88 ST #C204
CITY-ST-ZIP	MIAMI FL 33176
TITLE	TD <input type="checkbox"/> DELETE
NAME	BOLANOS, LIZETTE A
STREET ADDRESS	11217 SW 88 ST #C204
CITY-ST-ZIP	MIAMI FL 33176
TITLE	SD <input type="checkbox"/> DELETE
NAME	CENTENO, MAURICIO A
STREET ADDRESS	11217 SW 88 ST #C204
CITY-ST-ZIP	MIAMI FL 33176

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Juan M. Centeno

2/12/98

477-8000

CR2E034 (10/97)