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

CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400007334

THE GOLD WAY CORPORATION

Dringing Place of Business

FILED Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90058 002 ***150.00



rincipal riac	a or business	ing Address										
6615 S.W. 151			6615 S.W. 151 CT.									
MIAMI FL 3319	3	MAM	IAMI FL 33193				DO NOT WRITE IN THIS SPACE					
)							3. Date Incorporated or Qualifed	nio s	FACE	 -		ר
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			77- 443				01/31/1994		 -	τ.		4
	lace of Business		2a. Mailing Address				4. FEI Number		<u> </u>	+	olied For	4
21		26					65-0468711				Applicable	4
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required					}
City & Stat	10	27	City & State				A Firstles Consider Firstles			<u> </u>	`	11
	.6		¬				6. Election Campaign Financing				May Be Fees	11
Zip	Country	28 Zir	Zip Country				Trust Fund Contribution			Jea 10	Fees	1
				–			8. This corporation owes the current year Intangible Personal Property Tax. Yes No					
24	25 9. Name and Address of Curre	29					Personal Property Tax. LYes LNo 10. Name and Address of New Registered Agent					
	9. Name and Address of Curr	ent Registere	ad Agent		B1	Name	10. Name and Address of New Registe	eo A	gent			┨
ם וות	AN PEDRO R			- '	"	Name						ĺ
DURAN, PEDRO B					82	Street Addr	ress (P.O. Box Number is Not Acceptable)	_			 	7
6615 S.W. 151 CT.												_
MIAI	VII FL 33193			{	B3							1
[,			. [5	84	City			85	Zip C	ode	┥
Ĺ					┙			<u> </u>				1
							oration submits this statement for the purpos on's board of directors. I hereby accept the a					ļ
agent. I a	m familiar with, and accept the oblig	gations of, Se	ction 607.0505, Florid	ia Statut	es.	ne corporanc	or s board or directors. Thereby accept the a	ponn	.morn c	io reg	ister ou	}
SIGNATURE	**************************************		6. U.S. ANOTE: D				d when reinstatino) DAT	 -				}
42	Signature, typed or printed name of registered as			13.	gents	signature required			DIDE	CTO	20 151 42	ءَ ∤
12.	OFFICERS AND DIRECTORS DELETE			1,1 TITLE			ADDITIONS/CHANGES TO OFFICERS	ANL	Cha		Addition	1 3
}	OURAN, PEDRO B		1.2 NAME						ilge		13	
NAME I				_	_ 1						1 8	
STREET ADDRESS	6615 S.W. 151 CT.		1.3 \$			ADDRESS						Ì
CITY-ST-ZIP	MIAMI FL 33193			1.4 CITY-ST-ZIP								ŢÌ
TITLE	STD DELETE		2.1 T/TLE					☐ Cha	nge	Addition	1 `	
NAME	DURAN, GLORIA		2.2 NAM	ΉE							}	
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CITY-ST-ZIP								•			→ ~	
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\	•			5.4 CITY		Ļ						-
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NAME {				•								
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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 13 if granged, or on an attachment with an address, with all other like empowered.

SIGNATURE: