

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 10 PM 3:57

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandria B. Montanari
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000015577 (7)

1. Corporation Name
GOLD, INC.



Principal Place of Business

**9060 N.W. 13TH TERRACE
MIAMI FL 33172**

Mailing Address

**9060 N.W. 13TH TERRACE
MIAMI FL 33172**

2. Principal Place of Business

21 **9060 N.W. 13TH TERRACE**

Suite, Apt. #, etc.

22

City & State

23 **Miami, Florida**

Zip

24 **33172**

Country

25 **Dade**

2a. Mailing Address

26 **P.O. Box 522764**

Suite, Apt. #, etc.

27

City & State

28 **Miami, Florida**

Zip

29 **33152**

Country

30 **Fla**

9. Name and Address of Current Registered Agent

**DYE, MICHAEL A
9060 N.W. 13TH TERRACE
MIAMI FL 33172**

3. Date Incorporated or Qualified
02/25/1994

3a. Date of Last Report
04/24/1995

4. FFI Number
65-0479144

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 has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

Elliot N. Revell

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

P.O. Box 9060 NW 13TH TERRACE

83

84 City

Miami

FL

85 Zip Code

33172

11. Pursuant to the provisions of Sections 607.0607 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, both in the State of Florida. Such change was authorized by the corporation's board of directors. I, the undersigned, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.0607 and 607.1508, Florida Statutes.

SIGNATURE

Elliot N. Revell

Elliot Revell

Prs. V-Pres Sec-Treas. 5-8-96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **P
REVELL, ELLIOT**
STREET ADDRESS **906 N.W. 14TH TERRACE**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME **VPS
DYE, ANDREW**
STREET ADDRESS **9060 N.W. 13TH TERRACE**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

**Is not longer with
the company as of 5-22-95**

**500001827825
-05/17/96--01121--021
****675.00 ****225.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included 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:

Elliot N. Revell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elliot Revell

5-8-96

305-571-7153

CR2E034 (12/95)