

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

0273734

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000031202**

1. Corporation Name
GOLD DATA, INC.



Principal Place of Business 6802 N.W. 84TH AVENUE MIAMI FL 33166	Mailing Address 6802 N.W. 84TH AVENUE MIAMI FL 33166
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4995 NW 72ND AVENUE (Suite) Apt. #, etc. 22 405 City & State 23 MIAMI, FLORIDA Zip Country 24 33166 25 USA	2a. Mailing Address 26 19843 NW 65 CT Suite, Apt. #, etc. 27 City & State 28 MIAMI, FLORIDA Zip Country 29 33015 30 USA
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3. Date Incorporated or Qualified 04/25/1994	Applied For No: Applicable
4. FEI Number 65-0500280	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent NERA, CRESPO 3150 NW 80TH PLACE MIAMI FL 33172	10. Name and Address of New Registered Agent 81 Name NERA CRESPO 82 Street Address (P.O. Box Number is Not Acceptable) 5013 NW 112 CT 83 84 City Miami FL 85 Zip Code 33178
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11. Pursuant to the provisions of Sections 607.05001 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	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12																																																																																																																																				
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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, with all other like empowered.

SIGNATURE: _____ **JUAN P. SOLIDORO-CUELLAR** 4/20/99 (305) 592-9583
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)