

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

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May 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000073546 (1)

1. Corporation Name
GOLEMIST, INC.

Principal Place of Business

4077 N.E. 5TH TERR.
FT. LAUDERDALE FL 33334

Mailing Address

4077 N.E. 5TH TERR.
FT. LAUDERDALE FL 33334



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	5729 VISTA LINDA LN	26	5729 VISTA LINDA LN	10/06/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0525071	
City & State		City & State		Applied For	
23		28		Not Applicable	
BOCA RATON, FL		BOCA RATON, FL		5. Certificate of Status Desired	
Zip		Zip		8.75 Additional Fee Required	
24		29		6. Election Campaign Financing	
33433		33433		Trust Fund Contribution	
Country		Country		5.00 May Be Added to Fees	
25		30		8. This corporation owes or has paid the current year Intangible	
USA		USA		Personal Property Tax due June 30.	
				Yes No	

9. Name and Address of Current Registered Agent

LESKU, NASI M
11780 N.W. 14 ST. PLANTATION ACRES
PLANTATION ACRES FL 33323

10. Name and Address of New Registered Agent

81	Name	PETER STASSA, JR.
82	Street Address (P.O. Box Number is Not Acceptable)	5729 VISTA LINDA LANE
83		
84	City	BOCA RATON
	State	FL
85	Zip Code	33433

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: Peter Stassa, Jr. (PETER STASSA, JR.) DATE: 4-26-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	STASSA, PETER JR	1.2 NAME	
STREET ADDRESS	5729 VISTA LINDA LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 06811	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	GOODFELLOW, ROBERT	2.2 NAME	
STREET ADDRESS	98 MILL PLAIN RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	DANBURY CT 06811	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	
NAME	MITCHELL, NORMENT	3.2 NAME	
STREET ADDRESS	3 SKYLINE DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKFIELD CT 06804	3.4 CITY-ST-ZIP	
TITLE	ST	4.1 TITLE	
NAME	NASI, LESKU	4.2 NAME	
STREET ADDRESS	11780 N.W. 14 ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33323	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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(9)(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: Peter Stassa, Jr. (PETER STASSA, JR.) DATE: 4-26-98

CR2E034 (10/97)