FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

1995 MAY -1 AM 8:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500001481055
-05/09/95--01103--003
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000076221

1. Corporation Name

GOLDEN WORLDWIDE FISHERIES, INC.

Principal Place of Business / Mailing Address

3. Date Incorporated or Qualified: 10/12/94
3a. Date of Last Report: N/A

2. Principal Place of Business: 5540 NW 84 AVE.
Suite, Apt. #, etc:
City & State: MIAMI, FLORIDA
Zip: 33166 Country: U.S.A.

2a. Mailing Address: 5540 NW 84 AVE.
Suite, Apt. #, etc:
City & State: MIAMI, FLORIDA
Zip: 33166 Country: U.S.A.

4. FEI Number: 65-0531180 ☐ 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 [X] Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent
Name: OMAR POSTIGO
Street Address (P.O. Box Number is Not Acceptable): 11728 S.W. 91 TERR
City: MIAMI FL Zip Code: 33186

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] OMAR POSTIGO 4/14/95

12. OFFICERS AND DIRECTORS

Field	Officer 1	Officer 2
TITLE	P/D	VP/S
NAME	POSTIGO, OMAR	KUAN, RICARDO
STREET ADDRESS	11728 S.W. 91 TERR.	16121 S.W. 78 STREET
CITY-ST-ZIP	MIAMI, FL 33186	MIAMI, FL 33193

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Title	Change	Addition
P/D	[X]	☐
VP/S	[X]	☐

SCC 5-1-95

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)(i), Florida Statutes. I further certify that the information indicated on the 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: [signature] OMAR POSTIGO President/Director 4/14/95 (305) 591-2270

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #