

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000082574

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: GOULD & COMPANY, CHARTERED

## Current Principal Place of Business:

6585 ALLISON ROAD  
MIAMI BEACH, FL 33141 US

## New Principal Place of Business:

## Current Mailing Address:

6585 ALLISON RD.  
MIAMI BEACH, FL 33141

## New Mailing Address:

6585 ALLISON ROAD  
MIAMI BEACH, FL 33141 US

FEI Number: 65-0533678

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOULD, RONALD  
6585 ALLISON ROAD  
MIAMI BEACH, FL 33141 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GOULD, RONALD  
Address: 6585 ALLISON RD.  
City-St-Zip: MIAMI, FL 33141

Title: VP/D ( ) Delete  
Name: GOULD, ROBERTA  
Address: 6585 ALLISON ROAD  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Delete  
Name: GOULD, BRADLEY  
Address: 5343 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D (X) Delete  
Name: GOULD, JUSTIN  
Address: 6535 ALLISON ROAD  
City-St-Zip: MIAMI BEACH, FL 33141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GOULD, RONALD  
Address: 6585 ALLISON RD.  
City-St-Zip: MIAMI, FL 33141 US

Title: VP/D (X) Change ( ) Addition  
Name: GOULD, ROBERTA  
Address: 6585 ALLISON ROAD  
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD GOULD

P

04/03/2009

Electronic Signature of Signing Officer or Director

Date