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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P94000085589 (7) DOCUMENT #

1. Corporation Name ANTHONY GOLD, INC. Mailing Address Principal Place of Business 8050 NW MIAMI CT 8050 NW MIAMI CT

	E-137 Miami FL 33150 US			E-137 MIAMI FL 33150 US				3. Date Incorporated or Qualified		5/30/1995
2. 21	Principal Place o	of Business	2a.	Mailing Address				4. FEI Number 65-0536022		Applied For Not Applicable
	Suite, Apt. #, etc	3	27	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required
22	City & State			City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
23	Ζφ	Country	29	Ζιρ	Cour	ntry		8. This corporation has liability for in Florida Statutes Yes		under s. 199.032,
24		25	11	otorod Apont				10. Name and Address of New Re	gistered A	igent
}—	9.	Name and Address of C	urrent Hegi:	Stereo Agent		81	Name			
ZULETA, JUAN JOSE 8050 NW MIAMI CT E-137 MIAMI FL 33150						82 83	Street Addre	ess (P.O. Box Number is Not Acceptab	e)	
	MIAMI FL	33150			ļ	84	City	ation submits this statement for the pur of of directors. Thereby accept the appr	FL	85 Zip Code

	gnative, Niped or printed mains of nightered signs, and the of		E Bagisto e 1 Agent sign durcini, a red s	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND DIRE	DELETE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Change ☐ Addition
TITLE	ZULETA, JUAN J	[] preced		
NAME	8050 NW MIAMI CT E-137		1.2 N4ME	
SIREET ADDRESS			1.3 STREET ADDRESS	İ
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST ZIP	☐ Change ☐ Addition
TITLE	TVD	DELETE	2 1 317EF	
NAME	ZULETA, MARIA Y		2.2 NAME	
STREET ADDRESS	8050 NW MIAMI CT E-137		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAM! FL		2.4.Cr1Y - S1 - Zif*	Change Addition
TITLE		DELETE	3 1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
			3.4 CITY - ST - 7IF	
CITY - ST - ZIP		☐ DELETE	4 ' TI'(F	Crange Addition
TIFLE			4.2 NAME	
NAME			4 3 STREET ADDRESS	
STREET ADDRESS			4.4 C(TY - ST - 7)P	
CITY-SI-ZIP		DELETE	5 1 TOLE	Change Addition
TITLE			5.2 NAME	
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CITY+ST-ZIP		() DC [[]]	5.4 CiTY - S1 - ZiP	Change Addition
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NAME			6 2 NAME	
STREET ADDRESS			63 STREET ADOPESS	
CITY-ST. 7IP			64 GITY - ST - 7:P	A S OZIONA Florido Statutos Hurther

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily formshed and does not quertly for the exemption stated in Section 119.07(3)(k). 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 cath, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPES OR PRISTED NAME OF SIGNING OFFICER OR DIRECTOR