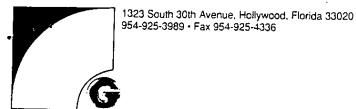
## **2000 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## Aug 16, 2000 8:00 am Secretary of State DOCUMENT # P95000043870 GOLDEN MARK FLORIDA CORP. 08-16-2000 90004 013 \*\*\*550.00 Principal Place of Business Mailing Address 1323 SOUTH 30TH AVENUE 420 DOUGHTY BLVD. HOLLYWOOD FL 33020 INWOOD NY 11096 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0591349 Not Applicable Zip Country \$8.75 Additional Country Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name XL CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 4434 OLD WINTER GARDEN RD. ORLANDO FL 32802 Zip Code City 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be 6750.00 Trust Fund Contribution: Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. TITLE ☐ Delete TITLE Change GOLDEN, ROBERT NAME NAME STREET ADDRESS 420 DOUGHTY BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **INWOOD NY 11096** TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITL F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I hereby certify that the inform is filing does not qualify for the exemption stated in Section 119.07(3)(i), Figrida Statutes. I further certify that the information tion supplied accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if indicatéd on this report or emental repor of the corporation or the receive ustee em



## August 8th,2000

Division of Corporations
Uniform Business Report Filings
P.O.Box 1500
Tallahassee, Florida 32302-1500

Re: Golden Mark Florida Corp. Doc. # P95000043870 Fed ID # 65-0591349

Gentlemen:

Enclosed please find the completed 2000 Uniform Business Report form, together with our check in the amount of \$ 550.00.

Thanking you, we remain.

Very truly yours,
GOLDEN MARK FLORIDA CORP.

Maryann Smith Accounts Representative