

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90015 032 ***150.00

DOCUMENT # P96000027308

1. Entity Name
BARGATE HOLDINGS, INC.



Principal Place of Business
**2875 NE 191ST ST STE 404
NO MIAMI BEACH, FL 33180**

Mailing Address
**2875 NE 191ST ST STE 404
NO MIAMI BEACH, FL 33180**

40055500



DO NOT WRITE IN THIS SPACE

01042007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0664767

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**REINHARD, SANFORD N
2875 NE 191ST ST STE 404
NO MIAMI BEACH, FL 33180**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**PD
GOLDLIST, BARRY JOSEPH
97 HOWLAND AVE
TORONTO, ONT, CA m5r 3b4**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**SD
GOLDLIST, GEROLD
139 STRATHEARN ROAD
TORONTO, ONT, CA M6C-1R7**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gerold Goldlist
Gerold Goldlist

Jan 8, 2007
Jan 8, 2007

416 863-5507
416 863-5507

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #