

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90025 029 ***150.00

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1. Entity Name
GOLDEN GLADES ACQUISITION CORP.



Principal Place of Business Mailing Address
1250 E. HALLANDALE BEACH BLVD **1250 E. HALLANDALE BEACH BLVD**
STE 300 **STE 300**
HALLANDALE, FL 33009 **HALLANDALE, FL 33009**

24049272



2. Principal Place of Business Suite, Apt. #, etc.
 Suite, Apt. #, etc.

3. Mailing Address Suite, Apt. #, etc.
 Suite, Apt. #, etc.

02182004 Chg-P CR2E034 (10/03)

City & State City & State

4. FEI Number **65-0762579** Applied For
 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAUNER, BLANCHE
1250 E. HALLANDALE BEACH BLVD
STE 300
HALLANDALE, FL 33009

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **PCD**
 STREET ADDRESS **COLVIN, MELVIN**
 CITY-ST-ZIP **1250 E. HALLANDALE BEACH BLVD., STE 300**
HALLANDALE, FL 33009

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **TSD**
 STREET ADDRESS **LAUNER, BLANCHE**
 CITY-ST-ZIP **1250 E. HALLANDALE BEACH BLVD., STE 300**
HALLANDALE, FL 33009

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **CFOD**
 STREET ADDRESS **MCGANN, EDWARD T**
 CITY-ST-ZIP **1250 E. HALLANDALE BEACH BLVD., STE 300**
HALLANDALE, FL 33009

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 STREET ADDRESS
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TITLE Change Addition
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 CITY-ST-ZIP

TITLE Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Blanche Launer **Blanche Launer** **4/16/04** **954-455-5953**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #