

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000096239

1. Entity Name

GOLD STANDARD FINANCIAL CORP.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90091 046 ***150.00

Principal Place of Business

Mailing Address

901 SOUTH STATE ROAD 7, PENTHOUSE B
HOLLYWOOD FL 33023

901 SOUTH STATE ROAD 7, PENTHOUSE B
HOLLYWOOD FL 33023-6744

2. Principal Place of Business

20535 N.W. 2nd Ave

3. Mailing Address

57912 Ave # 2

Suite, Apt. #, etc.

203

Suite, Apt. #, etc.

City & State

MIAMI,

City & State

Zip

33169

Country USA

PA013

Zip

Country

4. FEI Number

65-0793640

Applied For

Not Applicable

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

HOLLANDER, BRUCE L ESQ
901 SOUTH STATE ROAD 7, PENTHOUSE C
HOLLYWOOD FL 33023

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.

SIGNATURE

Bruce L. Hollander

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ~~DP~~ ☒ Delete
NAME GOLD, DAVID C
STREET ADDRESS 901 SOUTH STATE ROAD 7, PENTHOUSE B
CITY-ST-ZIP HOLLYWOOD FL 33023

TITLE DP ☒ Change ☐ Addition
NAME SHANKLIN, LINDA J.
STREET ADDRESS 20535 N.W. 2nd Avenue, Suite #203
CITY-ST-ZIP Miami, FL 33169

TITLE ~~DP~~ ☐ Delete
NAME LINDA J. SHANKLIN
STREET ADDRESS 20535 N.W. 2nd Ave
CITY-ST-ZIP MIAMI, FL 33169

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Linda J. Shanklin - PRES. & DIRECTOR
David C. Gold/President

3-21-2000 (305) 651-5600

Daytime Phone #

CR2E034 19/99