## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000104049

Entity Name: GOLDEN CELLULAR, INC.

FILED Apr 07, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2315 NW 107 AVE., B-25 2315 NW 107 AVE., B-38 MIAMI, FL 33172 US MIAMI, FL 33172

**Current Mailing Address: New Mailing Address:** 

10833 NW 29 STREET 2315 NW 107 AV, B-38 **BOX 90** MIAMI, FL 33172 MIAMI, FL 33172 US

FEI Number: 65-0879271 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FARCA, ESQUENAZI JOSE FARCA, ESQUENAZI JOSE 19333 COLLINS AVE. 2315 NW 107 AV B-38 #2205 BOX 90 SUNNY ISLES, FL 33160 US MIAMI, FL 33172 US

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: 04/07/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ( ) Delete Title: FARCA, ESQUENAZI JOSE FARCA, ESQUENAZI JOSE Name: Name: 19333 COLLINS AVE., #2205 Address: 2315 NW 107 AV B-38 Address: City-St-Zip: MIAMI, FL 33172

City-St-Zip: SUNNY ISLES, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE FARCA ESQUENAZI 04/07/2004 MR

Electronic Signature of Signing Officer or Director

Date