FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FLORIDA DEPARTMENT OF STATE THE FI CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 APR -2 AM 7: 45 DOCUMENT # P98000035497 SEURE HILLY DE STATE TALLAHASSEE, FLORIDA GOLD COAST ACQUISITIONS GROUP, INC. Principal Place of Business Mailing Address 2881 East Oakland Park Blud. Same Swife 100 DO NOT WRITE IN THIS SPACE Fort Lauderdale, Fibrida 33300 March 18, 1998 2. Principal Place of Business 2a. Mailing Address Applied For 26 10101 510, 57 Court 21 10101 S.W. 57th Cour No! Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired D MO 22 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Florida 🗆 mo Miami. Miami Florida 23 Trust Fund Contribution Added to Fees 33157 Country W.S.A. Country 8. This corporation owes the current year Intangible 25 U.SA, 29 Personal Property Tax ☐ Yes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent TAMELA J. STULTS, ESQUIRE 81 Edward Homfeld 7881 E. Oalstind Park Blod, Suite 100 The ammonwealth Blog. 82 83 FORT Landerdole, S. PORINA 33306 MUMS 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Edward Homfeld SIGNATUREX ne of registered agent and true if applicable when reinstating OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TAMELA J. STUIJS, PRESIDENT B DELETE Edward Homfeld, President & Change TITLE 2001 E. Oatland Park Blvd. Suite 100 2001 E. Datian running Commonwealth Building Commonwealth Philding NAME 1.2 NAME 10101 SW 574 Court 13 STREET ADORESS STREET ADDRESS Miami, Florida 33156 CITY-ST-ZIP 14 CITY-ST-ZIP DELETE SOUCHESING PARTY TITLE 21 TITLE 22 NAME NAME 04/07/99--01095--008 STREET ADDRESS 2 3 STREET ADDRESS ****300.00 ****150.00 2 4 CITY-ST-ZIP CITY-ST-ZIF DELETE To CLE 3 t TITLE Change 32 NAME MANE 3.3 STREET ADDRESS STREET ADDRESS

64 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

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4.4 CITY - ST-ZIP

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4.3 STREET ADDRESS

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4 2 NAME

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Edward Hornfeld Plasida 324/99 SIGNATURE

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