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Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90034 030 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000030425

1. Corporation Name
GOLDEN REEF JEWELRY INC.

Principal Place of Business
205 APOLLO BEACH BLVD.
APOLLO BEACH FL 33572

Mailing Address
205 APOLLO BEACH BLVD.
APOLLO BEACH FL 33572



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/30/1998

4. FEI Number
59-3500437
Applied For
Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
21 205 Apollo Beach Blvd
22 Suite, Apt. #, etc.
105

2a. Mailing Address
26 Suite, Apt. #, etc.
27

23 City & State
Apollo Beach

28 City & State

24 Zip
33572
25 Country
FL

29 Zip
30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARVAJAL, NOEMI
205 APOLLO BEACH BLVD.
APOLLO BEACH FL 33572

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

Table with 2 columns: OFFICERS AND DIRECTORS. Rows include PSD CARVAJAL, NOEMI and VTD CARVAJAL, IRELIO with fields for title, name, street address, and city-st-zip.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows 1.1-6.4 for title, name, street address, and city-st-zip.

14. 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 annual report or supplemental 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.

SIGNATURE: Noemi R. Carvajal 1-13-1999 (813) 645-9531
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)