

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000037549

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** GOLD MUSTACHE PUBLISHING, INC.

**Current Principal Place of Business:**

50 WEST PALM ST.  
ALTADENA, CA 91001 US

**New Principal Place of Business:**

**Current Mailing Address:**

50 WEST PALM ST.  
ALTADENA, CA 91001 US

**New Mailing Address:**

**FEI Number:** 65-0837818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

M.J.F. REGISTERED AGENT CORP.  
153 SEVILLA AVENUE  
CORAL GABLES, FL 33134 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PCD  
**Name:** GOLD, ELLIOT M  
**Address:** 50 WEST PALM STREET  
**City-St-Zip:** ALTADENA, CA 91001 US

**Title:** SD  
**Name:** GOLD, SHIRLEY A  
**Address:** 50 WEST PALM STREET  
**City-St-Zip:** ALTADENA, CA 91001 US

**Title:** D  
**Name:** FRICKE, RICHARD J  
**Address:** 114 PINE TREE RD  
**City-St-Zip:** ITHACA, NY 14850 US

**Title:** D  
**Name:** SILVERMAN, LISA R  
**Address:** 11615 HELMONT DR  
**City-St-Zip:** OAKTON, VA 22124 US

**Title:** D  
**Name:** HAWTHORNE, DAVID  
**Address:** 200 MERCER ST  
**City-St-Zip:** NEW YORK, NY 10012 US

I hereby 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 all other like empowered.

**SIGNATURE:** SHIRLEY A. GOLD

SD

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date