

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000063219

Entity Name: CHARLGATE, INC.

FILED  
Apr 22, 2009  
Secretary of State

## Current Principal Place of Business:

2875 NE 191ST STREET SUITE 404  
AVENTURA, FL 33180

## New Principal Place of Business:

1290 WESTON ROAD  
SUITE 201  
WESTON, FL 33326

## Current Mailing Address:

2875 NE 191ST STREET SUITE 404  
AVENTURA, FL 33180

## New Mailing Address:

1290 WESTON ROAD  
SUITE 201  
WESTON, FL 33326

FEI Number: 65-0854116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REINHARD, SANFORD N  
1290 WESTON ROAD  
SUITE 201  
WESTON, FL 33326 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GOLDLIST, BARRY JOSEPH  
Address: 97 HOWLAND AVE.  
City-St-Zip: TORONTO, CANADA, M5R 3B4

Title: SD ( ) Delete  
Name: GOLDLIST, GEROLD  
Address: 139 STRATHEARN ROAD  
City-St-Zip: TORONTO, ONTARIO, M6C 1R7

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GOLDLIST, BARRY JOSEPH  
Address: 97 HOWLAND AVE.  
City-St-Zip: TORONTO, ONTARIO, XX M5R 3B4

Title: SD (X) Change ( ) Addition  
Name: GOLDLIST, GEROLD  
Address: 139 STRATHEARN ROAD  
City-St-Zip: TORONTO, ONTARIO, XX M6C 1R7

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GEROLD GOLDLIST

SD

04/22/2009

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

\_\_\_\_\_  
Date