0162239

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000067367

1. Entity Name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GOLDCREST INTERNATIONAL, INC.



FILED Jan 30, 2003 8:00 am Secretary of State

01-30-2003 90099 038 ***150.00

Principal Place of Busines 450 N. PARK RD SUITE 404 HOLLYWOOD FL 33021 US	ss	Mailing Address 3436 PIERCE STREET HOLLYWOOD FL 33021				
2. Principal Place of Business		3. Mailing Address		T I DOGINETA ING NGING TOTHY DIGIN COIN GOTH GOTH BASIN HOOG HAS GUTHA ADDI ARTI T		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 65-0862322 Applied For Not Applicable	e	
Zip	Country	Zìp	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	7	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent]	
SHEEHAN, ROSE M Street 2900 UNIVERSITY DR				rebbie 5 Glade 436 Pierce St.	fed.	
STE 76 CORAL SPRINGS FL 33065 City Hally 43000 FL 33					_	
8. The above named entity submits this statement for the purpose of changing its registered office						
the obligations of regis	the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE TOTAL PLANT OF THE PROPERTY OF THE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	۽ إ⊢	
l l	ohn R RCE Street DOD FL 33021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Additio	0/01/ 100	
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						

Date

Daytime Phone #