

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000094613

FILED
May 18, 2007
Secretary of State

Entity Name: GOLDEN CHYLD COMMUNICATIONS, INC.

Current Principal Place of Business:

PO BOX 695035
MIAMI, FL 33269

New Principal Place of Business:

11870 WEST STATE ROAD 84
C6
DAVIE, FL 33325

Current Mailing Address:

P O BOX 69-5035
MIAMI, FL 33269

New Mailing Address:

11870 WEST STATE ROAD 48
DAVIE, FL 33325

FEI Number: 65-0874059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNITZER, GERALD S
2455 E. SUNRISE BLVD.
SUITE 502
FT LAUDERDALE, FL 33025 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GEORGE, GIBRE
Address: 21300 SAN SIMEON WAY, P5
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D () Delete
Name: JOHNSON, EZEMWA
Address: 19015 N.W. 8TH AVENUE
City-St-Zip: MIAMI, FL 33169

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: GEORGE, DEJON
Address: 11870 WEST STATE ROAD 84 #C6
City-St-Zip: DAVIE, FL 33325

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: GEORGE, GIBRE

D

05/18/2007

Electronic Signature of Signing Officer or Director

Date