2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097423

Entity Name: GOLD CONSUMABLES, INC.

FILED Apr 14, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5453 COLONIAL OAKS BLVD. 11119 HEATHROW AVE SARASOTA, FL 34232 SPRING HILL, FL 34609

Current Mailing Address: New Mailing Address:

5453 COLONIAL OAKS BLVD. 11119 HEATHROW AVE SARASOTA, FL 34232 SPRING HILL, FL 34609

FEI Number: 65-0962490 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ICARD, MERRILL, ET. AL. ATTN: JASON A. LESSINGER 2033 MAIN STREET #600 SARASOTA, FL 34237 US ICARD, MERRILL, ET. AL. 2033 MAIN STREET SUITE 600 SARASOTA, FL 34237 US

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: 04/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 GOLD, RONALYNN M
 Name:
 GOLD, RONALYNN M

 Address:
 5453 COLONIAL OAKS BLVD.
 Address:
 11119 HEATHROW AVE

 City-St-Zip:
 SARASOTA, FL
 34232
 City-St-Zip:
 SPRING HILL, FL
 34609

 Name:
 GOLD, MARTIN L
 Name:
 GOLD, MARTIN L

 Address:
 5453 COLONIAL OAKS BLVD.
 Address:
 11119 HEATHROW AVE

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:
 SPRING HILL, FL 34609

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RONALYNN M GOLD PRES 04/14/2005