

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000100419

Entity Name: GOCHE CORP.

FILED
Apr 09, 2007
Secretary of State

Current Principal Place of Business:

881 OCEAN DRIVE
APT. 8A
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

1200 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0961300 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGI REGISTERED AGENTS, INC.
1200 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131 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: D () Delete
Name: ANGEL, AMPARO
Address: 881 OCEAN DRIVE APT. 3F
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: NACHTIGALL, BRIGITTE
Address: 881 OCEAN DRIVE APT. 3F
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: NACHTIGALL, PATRICIA
Address: 881 OCEAN DRIVE APT. 3F
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: NACHTIGALL, ANDREA
Address: 881 OCEAN DRIVE APT. 3F
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: AMPARO ANGEL

D

04/09/2007

Electronic Signature of Signing Officer or Director

_____ Date