FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S59659** **(0)**

1. Corporation Name
GOLDEN BAY, INC.

Principal Place of Business
2335 9TH ST N
#302-B
NAPLES FL 33940
US

Mailing Address
2335 9TH ST N
#302-B
NAPLES FL 33940
US

3. Date Incorporated or Qualified: 06/12/1991
3a. Date of Last Report: 05/12/1995

2. Principal Place of Business
21 1080 Industrial Blvd
Suite, Apt. #, etc.
22
City & State
23 Naples, Florida
Zip (new) 24 34104
Country 25 Collier

2a. Mailing Address
26 1080 Industrial Blvd
Suite, Apt. #, etc.
27
City & State
28 Naples, Florida
Zip (new) 29 34104
Country 30 Collier

4. FEI Number: 65-0282309 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
GIDLOW, SCOTT
2335 TAMIAMI TRAIL N, SUITE 409
NAPLES FL 33940

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 1080 Industrial Blvd
84 City: Naples FL 85 Zip Code: 34104

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ Signature, typed or printed name of registered agent and the date with it. TITLE: Registered Agent signature required when registered. DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	YEN, CLIFF	
STREET ADDRESS	NO 3 2ND ROAD	
CITY-ST-ZIP	TAIPEI TAIWAN ROC	
TITLE	D	☐ DELETE
NAME	GILGER, DALE	
STREET ADDRESS	3110 LAUREL RIDGE CT.	
CITY-ST-ZIP	BONITA SPRGS FL	
TITLE	DP	☐ DELETE
NAME	GIDLOW, SCOTT	
STREET ADDRESS	1330 DERBYSHIRE CT APT. 204E	
CITY-ST-ZIP	NAPLES FL	
TITLE	S	☐ DELETE
NAME	GILGER, BEATRICE	
STREET ADDRESS	3110 LAUREL RIDGE CT	
CITY-ST-ZIP	BONITA SPRINGS FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SCOTT GIDLOW — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — May 15, 1996 (Date) — (941)434-7399 (Daytime Phone #)

CR2E034 (12/95)