## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S84658

Feb 01, 2008
Secretary of State

**Entity Name: GOLDEN WIND CORPORATION** 

**Current Principal Place of Business: New Principal Place of Business:** C/O IRIONDO 881 OCEAN DR., #22-B KEY BISCAYNE, FL 33149 **Current Mailing Address: New Mailing Address:** C/O IRIONDO 901 PONCE DE LEON BLVD., #501 CORAL GABLES, FL 33134 FEI Number: 65-0316979 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: IRIONDO, ANDRES J 901 PONCE DE LEON BLVD. #501 CORAL GABLES, FL 33149 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition LANDSBERGER, ELIAS, Name: Name: 201 S. BISCAYNE BLVD., STE 1500 Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: () Delete Title: () Change () Addition LANDSBERGER, NATALIA. Name: Name: 201 S. BISCAYNE BLVD., STE 1500 Address: Address: MIAMI, FL 33131 City-St-Zip: City-St-Zip:

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: ELIAS LANDSBERGER D 02/01/2008

**FILED**