


2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # V01231
 1. Entity Name
GOLDEN HARVEST SALES CO., INC.



Principal Place of Business Mailing Address
 4788 N US 1 PO BOX 2549
 FT. PIERCE, FL 34946 US FT. PIERCE, FL 34954 US

DO NOT WRITE IN THIS SPACE



03112004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0311888	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BASS, R. DALE
 8686 ANDREWS AVENUE
 FORT PIERCE, FL 34981

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B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000089450
 03/15/04-80099-002 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BASS, R. DALE 8686 ANDREWS AVENUE FT. PIERCE, FL 34954
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BASS, DIANNA 8686 ANDREWS AVENUE FT. PIERCE, FL 34954
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dianna Bass* Dianna Bass, Secretary 3/12/04 772/461-6669
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #