


2002/03

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 MAY -5 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V51272	
1. Entity Name GOLDEN CAB, CORP.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5813 GEORGIA AVE.		3. Mailing Address 5813 GEORGIA AVE.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State WEST PALM BEACH FL		City & State WEST PALM BEACH FL	
Zip 33405	Country	Zip 33405	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0345447		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent		
Name JOSE JULIO HERNANDEZ		
Street Address (P.O. Box Number is Not Acceptable) 5813 GEORGIA AVE.		
City W.P.B.	FL	Zip Code 33405

8. 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 *Jose Julio Hernandez* DATE _____
Signature typed or printed name of registered agent, and fee if applicable. (NOTE: Registered Agent's signature required when re-registering)

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HERNANDEZ, JOSE J. 616 WRIGHT DR. LAKE WORTH, FL 33461	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100018941601 05/14/03--01051--027 **300.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROSARIO, FRANCIA 616 WRIGHT DR. LAKE WORTH FL 33461	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Jose Julio Hernandez* Date _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E0348 (12/02)

attachment

April 25, 2003

Division of Corporations
Uniform Business Report Filing
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: 65-0345447
DOC. V51272

To Whom This May Concern,

I am writing this letter because I have been informed by my accountant that my corporation GOLDEN CAB, CORP. has been dissolved for failure to send in my Uniform Business report for the year 2002 and payment of the renewal fee. I have not yet received any correspondence in the mail to renew my corporation.

I have enclosed a check for the amount of \$150.00 to pay for the 2002 renewal with a complete Uniform Business Report. Thank you for your help in this matter. If there is anything else that needs to be done please contact me.

Sincerely,

GOLDEN CAB, CORP.


Jose J. Hernandez
President