


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 04, 2008 8:00 am
Secretary of State

04-17-2008 90164 042 ***138.75

30008683

DOCUMENT # L00000006631 1. Entity Name GOMEZ & GOMEZ ASSOCIATES, LLC	
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Principal Place of Business 5555 NW 36TH AVE HIALEAH, FL 33142	Mailing Address 5555 NW 36TH AVE HIALEAH, FL 33142
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DO NOT WRITE IN THIS SPACE



03052008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 65-1019537	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent
**GOMEZ, MIGUEL
5555 NW 36TH AVE
HIALEAH, FL 33142**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOMEZ, MIGUEL 5555 NW 36TH AVE HIALEAH, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GOMEZ, FRANCISCO 5555 NW 36TH AVE HIALEAH, FL 33142
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 808, Florida Statutes.

SIGNATURE: Francisco Gomez **6-2-2008**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #