

DOCUMENT # **G62345**

1. Entity Name

LA GOMERA INVESTMENT CORPORATION ✓**FILED**
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90102 032 ***150.00

Principal Place of Business C/O ACC GROUP 1101 BRICKELL AVE., STE 402 MIAMI FL 33131		Mailing Address RJVF CORPORATE SERVICES, INC 200 S BISCAYNE BLVD #4100 MIAMI FL 33131	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0737796		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RJVF CORPORATE SERVICES, INC C/O STEEL HECTOR & DAVIS 200 S BISCAYNE BLVD., STE #4100 MIAMI FL 33131		7. Name and Address of New Registered Agent Name CORPORATE INTERNATIONAL REGISTERED AGENTS INC. Street Address (P.O. Box Number is Not Acceptable) SAME City FL Zip Code	
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			
SIGNATURE _____ (NOTE: Registered Agent signature required when transferring) DATE _____			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐		10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST CORDERO-CASAL, ALI 1101 BRICKELL AVE., STE 402 MIAMI FL 33131 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: Ali Cordero Casal		4/30/02	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	