

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L34018

FILED  
Apr 27, 2008  
Secretary of State

Entity Name: GOMEZ ASSOCIATES ARCHITECTS, P.A.

## Current Principal Place of Business:

7334 NW 5TH ST  
PLANTATION, FL 33317 US

## New Principal Place of Business:

4621 NW 103RD AVE  
SUNRISE, FL 33351 US

## Current Mailing Address:

7334 NW 5TH ST  
PLANTATION, FL 33317 US

## New Mailing Address:

4621 NW 103RD AVE  
SUNRISE, FL 33351 US

FEI Number: 65-0193637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOMEZ, ALBERTO F  
7334 NW 5TH ST  
PLANTATION, FL 33317 US

## Name and Address of New Registered Agent:

GOMEZ, ALBERTO F  
4621 NW 103RD AVE  
SUNRISE, FL 33351 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:

04/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GOMEZ, ALBERTO F P  
Address: 7334 NW 5TH ST  
City-St-Zip: PLANTATION, FL 33317 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GOMEZ, ALBERTO F P  
Address: 4621 NW 103RD AVE  
City-St-Zip: SUNRISE, FL 33351 US

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: ALBERTO F. GOMEZ

P

04/27/2008

Electronic Signature of Signing Officer or Director

Date