

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000042251

Entity Name: CLAUDIO R. GOMEZ, PA

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

20283 STATE RD 7
400
BOCA RATON, FL 33498

New Principal Place of Business:

5232 NE 2ND TE
FT. LAUDERDALE, FL 33334

Current Mailing Address:

PO BOX 970741
COCONUT CREEK, FL 33097

New Mailing Address:

FEI Number: 03-0426357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, CLAUDIO R
20283 STATE RD 7
400
BOCA RATON, FL 33498 US

Name and Address of New Registered Agent:

GOMEZ, CLAUDIO R
5232 NE 2ND TE
FT LAUDERDALE, FL 33334 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:

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GOMEZ, CLAUDIO R
Address: PO BOX 970741
City-St-Zip: COCONUT CREEK, FL 33097

Title: DV () Delete
Name: VALERY, MARIA C
Address: PO BOX 970741
City-St-Zip: COCONUT CREEK, FL 33097

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GOMEZ, CLAUDIO
Address: PO BOX 970741
City-St-Zip: COCONUT CREEK, FL 33097

Title: DV (X) Change () Addition
Name: VALERY, MARIA
Address: PO BOX 970741
City-St-Zip: COCONUT CREEK, FL 33097

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: CLAUDIO GOMEZ

DP

05/01/2008

Electronic Signature of Signing Officer or Director

Date