

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000087526

FILED
Oct 07, 2008
Secretary of State

Entity Name: GOMEZ BAIL BONDS, INC.

Current Principal Place of Business:

215 SW 17 AVE
305
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 557173
MIAMI, FL 33255

New Mailing Address:

FEI Number: 52-2372594

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, FABIOLA
215 SW 17 AVE
MIAMI, FL 33255 US

Name and Address of New Registered Agent:

GOMEZ, MAREK
215 SW 17 AVE
305
MIAMI, FL 33255 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: MAREK GOMEZ

10/07/2008

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: PD () Delete
Name: GOMEZ, FABIOLA
Address: 215 SW 17 AVE
City-St-Zip: MIAMI, FL 33135

Title: SEC () Delete
Name: GOMEZ, MAREK H
Address: 215 SW 17 AVE
City-St-Zip: MIAMI, FL 33135

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOMEZ, MAREK
Address: 215 SW 17 AVE
City-St-Zip: MIAMI, FL 33135

Title: VP (X) Change () Addition
Name: GOMEZ, FABIOLA H
Address: 215 SW 17 AVE
City-St-Zip: MIAMI, FL 33135

Title: SEC () Change (X) Addition
Name: GOMEZ, FABIOLA
Address: 215 SW 17 AVE
City-St-Zip: MIAMI, FL 33135

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: MAREK GOMEZ

PD

10/07/2008

Electronic Signature of Signing Officer or Director

Date