

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000031045

FILED
Oct 07, 2008
Secretary of State

Entity Name: GOMEZ PROFESSIONAL SERVICES INC

Current Principal Place of Business:

215 SW 17TH AVE
SUITE 307
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 558544
MIAMI, FL 33255

New Mailing Address:

215 SW 17TH AVE
SUITE 307
MIAMI, FL 33135

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, FABIOLA D
215 SW 17TH AVE
SUITE 307
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

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: FABIOLA GOMEZ

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 D
Address: P.O BOX 558544
City-St-Zip: MIAMI, FL 33255

Title: VP () Delete
Name: GOMEZ, JUAN
Address: 215 SW 17 AVE
City-St-Zip: MIAMI, FL 33135 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOMEZ, FABIOLA D
Address: 215 SW 17 AVE SUITE 307
City-St-Zip: MIAMI, FL 33255

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

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

PD

10/07/2008

Electronic Signature of Signing Officer or Director

Date