

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000075112

Entity Name: GONME SERVICES, INC.

**FILED**  
**Jun 28, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

4304 COLT LANE  
WEST PALM BEACH, FL 33406

## **New Principal Place of Business:**

550 SW DUVAL AVE  
PORT ST LUCIE, FL 34983

## **Current Mailing Address:**

4304 COLT LANE  
WEST PALM BEACH, FL 33406

## **New Mailing Address:**

550 SW DUVAL AVE  
PORT ST LUCIE, FL 34983

FEI Number: 20-4965623

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## **Name and Address of Current Registered Agent:**

PAGAN, JOSE L  
4304 COLT LANE  
WEST PALM BEACH, FL 33406 US

## **Name and Address of New Registered Agent:**

GONZALEZ, JOSE  
550 SW DUVAL AVE  
PORT ST LUCIE, FL 34983 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: JOSE L GONZALEZ

06/28/2007

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PAGAN, JOSE L  
Address: 4304 COLT LANE  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VP (X) Delete  
Name: GONZALEZ, JOSE L  
Address: 4304 COLT LANE  
City-St-Zip: WEST PALM BEACH, FL 33406

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: GONZALEZ, JOSE L  
Address: 550 SW DUVAL AVE  
City-St-Zip: PORT ST LUCIE, FL 34983

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSE L GONZALEZ

P

06/28/2007

Electronic Signature of Signing Officer or Director

Date