FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 JUL 20 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-07/25/95--01109--008
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000040132

1. Corporate Name

FEDERAL AUDITING COMMUNICATION CORP.

Principal Place of Business / Mailing Address

5600 SW 135 AV.
Suite 104
Miami,Fla 33183

3. Date Incorporated or Qualified: 5-27-94

3a. Date of Last Report: N/A

2. Principal Place of Business

21 15435 SW 111 Ln

Suite Apt # etc: 22

City & State: 23 Miami,Fla.

Zip: 24 33196 County: 25 Dade

2a. Mailing Address

26 P.O.Box 960786

Suite Apt # etc: 27

City & State: 28 Miami,Fla.

Zip: 29 33296-0786 County: 30 Dade

4. FEI Number: 65-0492730 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. The corporation has elected to be subject to the provisions of Section 607.0901, Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

EDGAR I.GOMEZ
5600 SW 135 AV.
Suite 104
Miami Fla,33183

10. Name and Address of New Registered Agent

81 Name: EDGAR I.GOMEZ

82 Street Address (P.O. Box Number is Not Acceptable): 15435 SW 111 Ln.

83

84 City: MIAMI FL 85 Zip Code: 33196

11. Pursuant to the provisions of Section 607.0501, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The principal place of business of the corporation is the same as the registered office. The addresses of directors, officers and the registered agent, including street addresses, are identical to those on file with the Department of State, Division of Corporations, Florida Statutes.

SIGNATURE: (Registered agent's signature) (Registered agent's name) (Date)

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	P/T Edgar I.Gomez 8730 SW 133 Av.#315 Miami Fla 33183
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	V/S Maria Leonor Gomez 8730 SW 133 Av.#315 Miami Fla 33183
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☒ Change ☐ Addition P/T Edgar I.Gomez 15435 SW 111 Ln Miami Fla 33196
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☒ Change ☐ Addition V/S Maria Leonor Gomez 15435 SW 111 Ln Miami Fla 33196
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition 7/20/95 MS
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is accurate and that I have not qualified for the exemption stated in Section 607.0501, Florida Statutes. I further certify that the information shown on the annual report or supplemental annual report is true and correct and that my 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 hereinabove or on an attachment with an address.

SIGNATURE: P/T EDGAR GOMEZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-95 (305)388-0490
Date Daytime Phone #