

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000089675 (8)

1. Corporation Name

GOFER INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

10729 SW 117 CT.
MIAMI FL 33186

10729 SW 117 CT.
MIAMI FL 33186

FILED

97 AUG 11 AM 12: 27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/31/1996	3a. Date of Last Report
4. FEI Number 65-0704115	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GONZALEZ, NELSON
10720 SW 117 CT.
MIAMI FL 33186

81 Name

GONZALEZ, NELSON

82 Street Address (P.O. Box Number is Not Acceptable)

10729 S.W. 117 COURT

83

84 City

Miami

FL

85 Zip Code

33186

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE
NAME FERNANDEZ, JOSE
STREET ADDRESS 10729 SW 117 CT.
CITY-ST-ZIP MIAMI FL 33186

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DV ☐ DELETE
NAME GONZALEZ, NELSON
STREET ADDRESS 10729 SW 117 CT.
CITY-ST-ZIP MIAMI FL 33186

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DS ☐ DELETE
NAME VALDIVIESO, SONIA
STREET ADDRESS 10729 SW 117 CT.
CITY-ST-ZIP MIAMI FL 33186

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

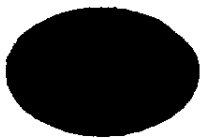
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate 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 this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (4/97)



GOFER INTERNATIONAL, INC.

**10729 S.W. 117 COURT
MIAMI, FLORIDA 33186**

**PHONE : (305) 270-0459
FAX : (305) 412-9626**

***Annual Reports Section
Division of Corporation
Post Office Box 6327
Tallahassee, FL 32314***

***Ref. : FEI No. 65-0704115
Gofer International ,Inc.***

Dear Sirs,

According to my telephone conversation with your Ms. Sheryl,I am sending this letter to indicate my company has not received any notification before about this payment and only received the last one

***Our company was established on November 01, 1996 and have not knowledge about this payment .
Please accept our excuses and find attached our check for \$165.00 to cover our obligation as agreed with Ms. Sherry***

Please do not hesitate to contact me if you have additional questions.

Sincerely Yours,

***Nelson Gonzalez
Vice -President***