FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000010185

1. Corporation Name

MIKE GOMEZ CONSTRUCTION CONSULTING, INC.

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90178 026 ***150.00



Principal Place	e of Business	Mailing Address				1 10211021 112 18451 1844 8844 8844 8844 8844 1844 184		
1731 S.W. 98TH MIAMI FL 33165		1731 S.W. 98TH AVENUE MIAMI FL 33165				DO NOT WRITE IN THIS SPACE		
		•				3. Date Incorporated or Qualifed	7	
						02/02/1998	_]	
	lace of Business	2a. Mailing Address				4. FEI Number Applied For Not Applied For Not Applied For	_	
21 1004	10 SW 33 ST_	26					4	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State 23 MIAMI FL		City & State				6. Election Campaign Financing Trust Fund Contribution Added to Fees		
Zip Country		Zip Country			8. This corporation owes the current year Intangible			
24 331	<u> </u>	29 30	<u>) </u>			Personal Property Tax. Yes No		
~	9. Name and Address of Current	Registered Agent		81 Name		10. Name and Address of New Registered Agent	-	
COM	MEZ, JESUS M			81 Name	MI	lichael A. Gomez		
	I S.W. 98TH AVENUE	82 Street Addi			Addre	ess (P.O. Box Number is Not Acceptable) 33 ST.		
MIAN	VII FL 33165			B3	10		7	
			H	84 City	· •	85 Zip Code	_	
						11AM1 FL 33165		
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State of m familiar with and accept the obligations.	2 and 607.1508, Florida Statutes, of Florida Such change was auth ions of, Section 607.0505, Florida	the ab orized a Statu	ove-named of by the corporates.	corpo oration	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered		
SIGNATURE		(•	4/14/99	1	
***	Signature, typed or printed name of registered agent			gent signature re	equired :	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	-	
12.	OFFICERS ANI	D DIRECTORS	13.	F	n	PRESIDENT (Change Addition	7	
TITLE			1.2 NAM		, , , , , , , , , , , , , , , , , , ,	MICHAEL A. GOMEZ		
NAME				EET ADDRESS	1	10040 SW 33 ST.		
STREET ADDRESS			1.4 CIT		•	MIAMI, FL 33165	1	
CITY-ST-ZIP TITLE		☐ DELETE	2.1 TITL			☐ Change ☐ Addition	7	
NAME		-	2.2 NAN	1		,	1	
STREET ADDRESS	nece		2.3 STREET ADORESS				-	
				Y-ST-ZIP				
TITLE		☐ DELETE	3.1 TITL			Change Addition	ī.	
NAME .		. -	3.2 NAM	/E	•			
STREET ADDRESS			3.3 STR	EET ADDRESS		•	1	
CITY-ST-ZIP			3.4, CIT	Y-ST-ZIP				
TITLE		☐ DELETE	4.1 TITL	Ē		☐ Change ☐ Addition	n	
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 STR	REET ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	5.1 TITL	£		☐ Change ☐ Addition	n (
NAME			5.2 NAM	Æ .			-	
STREET ADDRESS:			5.3 STF	REET ADDRESS			İ	
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP			╛	
TITLE		☐ DELETE	6.1 TITL	.Е		☐ Change ☐ Addition	1	
NAME			6.2 NA	VE .				
STREET ADDRESS			6.3 STF	REET ADORESS			}	
CTTV_ST_7IP	1		6.4 CIT	Y+ST-ZIP			-	

14. I 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 on an attachment with an addresse, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305) 520-2439