

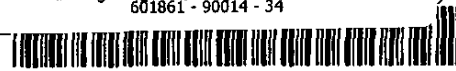
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90085 002 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000102427 1. Corporation Name ROBERT GOMEZ, INC.			
Principal Place of Business 19712 N.W. 82ND PLACE MIAMI FL 33015		Mailing Address 19712 N.W. 82ND PLACE MIAMI FL 33015	
2. Principal Place of Business 21 19131 NW 64 CT. Suite, Apt. #, etc. 22 City & State 23 Hialeah, FL Zip 24 33015		2a. Mailing Address 26 19131 NW 64 CT. Suite, Apt. #, etc. 27 City & State 28 Hialeah, FL Zip 29 33015 Country 25 USA 30 USA	
9. Name and Address of Current Registered Agent GOMEZ, ROBERT 19712 N.W. 82ND PLACE MIAMI, FL 33015			
10. Name and Address of New Registered Agent 81 Name Robert Gomez 82 Street Address (P.O. Box Number is Not Acceptable) 83 19131 NW 64 CT. 84 City MIAMI FL 85 Zip Code 33015			
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 Robert Gomez DATE 7/04/99 Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS TITLE President or Owner ☐ DELETE NAME Robert Gomez STREET ADDRESS 19131 NW 64 CT CITY-ST-ZIP MIAMI, FL 33015		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE non-applicable ☐ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-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, or on an attachment with an address. SIGNATURE: Robert Gomez DATE 7/29/99 (305) 710-8084 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/07/1998	
4. FEI Number 589647887	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. This corporation owes the current year Intangible Personal Property. ☐ Yes ☒ No	