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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 28 1997 8:00am

Sandra B. Mortham

ANNUAL REPORT 1997		0. 7./	Secretary of State DIVISION OF CORPORATIONS		Secretary of State		
1. Corporation	MENT # S2086 C. GOMEZ, INC.	8 (3)					
Dringing! Olazz	s of their see	Mailing Address		·········	-{		
Principal Place of Business							
7907 NW 53RD ST SUITE 419		7907 NW 53RD ST SUITE 419			}		
MIAMI FL 3316	6	MIAMI FL 33166-4603					
					3. Date Incorporated or Qualified 12/10/1990	3a. Date of Last R 02/20/1996	eport
2. Principal (*) 21	ace of Business	2a. Mailing Address 26			4. FEI Number 65-0245931		pplied For ot Applicable
Suite, Apt	#, etc	Suite, Apt #, etc.				40.75	
22		27			5. Certificate of Status Desired		equired
City & State	9	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	
23 Zipi	Country	28 Zip	Country		8. This corporation has liability for		
24	25		30			Yes No	. 199.032,
==11	g, Name and Address of Curr				10. Name and Address of New Re	gistered Agent	
GON	MEZ, OSCAR C		81 1	Name			
	7 NW 53RD ST		82 3	Stroot Addre	ess (P.O. Box Number is Not Acceptat	nle)	
SUIT	TE 419			on our radic	is (1.0. Box Hallbor is Hot Pooplat	<i></i>	
MIAI	MI FL 33166		83				
			84 (City		85 Zip	Code
						FL	
office or r	edistered agent or both in the Sv	ate of Florida Such change was a ligations of, Section 607,0505, Flor	utharized by th	ne corporation	oration submits this statement for the pon's board of directors. I hereby acceptions to the property of the pr	pt the appointment as	registered
12.		AND DIRECTORS	13.	angrickare radare	ADDITIONS/CHANGES TO OFFIC		RS IN 12
116	DPT	DELETE	1 1 TITLE			Change	Addition
NAME	GOMEZ, OSCAR C		12 NAME				
STREET ADDRESS	7907 NW 53RD ST 419		13 STREET AD	DRESS			
CHY-\$1-7(f)	MIAMI FL		14 City-St-	ZIP]			
TITLE	VS	X DELETE	2 1 TITLE		VS	Change	Addition
NAME	TAGGERT, JAMES J.		2.2 NAME		DONELLI, DAVID P.		
STREET ADDRESS	7907 NW 53RD ST 419		2 3 STREET AD	DRESS	7907 NW 53rd STREET	<i>#</i> 419	
CITY ST 20	MIAMI FL		2 4 CITY-ST-	ZIP	MIAMI, FL 33166		—
TITLE		☐ DELETE	3 1 TITLE		•	L Change	Addition
NAME			3.2 NAME				ì
STREET ADDRESS			3 3 STREET AD	1			
C-TY-S'-ZIP			3 4. CITY - \$T -	ZIP		Change	Addition
Tift!		L DELETE	4.1 TITLE			LL CHANGE	LI AGUIGION
NAME CONTACTORISM			4. 2 NAME	Open			
SUREEL ADDRESS			4.3 STREET AD	·			
C TY - ST - ZiF'	the state of the s	DELETE	4.4 City-ST-	LIT		Change	Addition
NAM:		Digital Co	5.2 NAME			Villa State	
STREET ADDRESS			5.3 STREET AD	IDRESS			
CHY-S1-ZIP			5.4 CITY - ST - 2	+			
TIILE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET AD	idress			
CITY ST Ze	1		6.4 CITY - \$1 - 2				
14. I do herel	by cert ly that the information supp	led with this filing does not qualif	y for the exem	ption stated	in Section 119.07(3)(i), Florida Statute	s. I further certify that	the
mlormabo Lam an o appears i	ir indicated on this annual report of fricer or director of the corporation in Block 12 or Block 13 if chapted	or suppliemental annual report is tr for the receiver or trustee empowing or or ari attachment with an add	ue and accura ered to execut ress.	e this report	my signature shalf have the same lega as required by Chapter 607, Florida s	ar effect as if made un Statutes; and that my i	iuer vain; that name

(OSCIAR (I) GOMEZ

02-18-97

Date

305-470-2425

Daylime Prione #