

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000059978

**Entity Name:** N.O.M. DIGITAL INC

**Current Principal Place of Business:**

665 SE 10TH STREET  
SUITE 201  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

665 SE 10TH STREET  
SUITE 201  
DEERFIELD BEACH, FL 33441 FL

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ANGELA DENISE DELGADO CPA PA  
665 SE 10TH STREET  
SUITE 201  
DEERFIELD BEACH, FL 33441 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name AMBROSIO CUQUE, LUIS  
Address 665 SE 10TH STREET SUITE 201  
City-State-Zip: DEERFIELD BEACH FL 33441

Title VP  
Name AGUDELO, JUAN ESTEBAN  
Address 665 SE 10TH STREET SUITE 201  
City-State-Zip: DEERFIELD BEACH FL 33441

Title DIR  
Name TABORDA, DANIEL  
Address 665 SE 10TH STREET SUITE 201  
City-State-Zip: DEERFIELD BEACH FL 33441

Title T  
Name CERRILLO, ALEXANDRO  
Address 665 SE 10TH STREET SUITE 201  
City-State-Zip: DEERFIELD BEACH FL 33441

Title S  
Name CONTRERAS, GERARDO  
Address 665 SE 10TH STREET SUITE 201  
City-State-Zip: DEERFIELD BEACH FL 33441

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUIS AMBROSIO CUQUE

P

06/30/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date