

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J92159

FILED
Mar 15, 2005
Secretary of State

Entity Name: GALLET ENTERPRISES, INC.

Current Principal Place of Business:

236 SW PARK DR
PORT SAINT LUCIE, FL 34953 US

New Principal Place of Business:

236 SW PAAR DR
PORT SAINT LUCIE, FL 34953 US

Current Mailing Address:

236 SW PARK DR
PORT SAINT LUCIE, FL 34953 US

New Mailing Address:

236 SW PAAR DR
PORT SAINT LUCIE, FL 34953 US

FEI Number: 65-0006743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLET, YVES
810 N.W. 9TH AVE
DANIA, FL 33004 US

Name and Address of New Registered Agent:

GALLET, YVES
236 SW PAAR DRIVE
PORT ST. LUCIE, FL 43953 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:

03/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GALLET, YVES,
Address: 236 SW PARK DR
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D () Delete
Name: GALLET, LISA,
Address: 236 SW PARK DR
City-St-Zip: PORT SAINT LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GALLET, YVES,
Address: 236 SW PAAR DR
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D (X) Change () Addition
Name: GALLET, LISA,
Address: 236 SW PAAR DR
City-St-Zip: PORT SAINT LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LISA GALLET

D

03/15/2005

Electronic Signature of Signing Officer or Director

Date