

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 21, 2003 8:00 am
Secretary of State

07-21-2003 90136 011 ***550.00

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DOCUMENT # **P01000115866**

1. Entity Name
GALAY INCORPORATED



Principal Place of Business
**9882 ERICA CT.
BOCA RATON FL 33496**

Mailing Address
**9882 ERICA CT.
BOCA RATON FL 33496**

2. Principal Place of Business
18058 Clearbrook Cir.

3. Mailing Address
18058 Clearbrook Cir.

City & State
BOCA RATON, FL.

City & State
BOCA RATON, FL.

Zip
33498

Country
USA

4. FEI Number **80-0021245**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *W. Strauss* **W. STRAUSS** DATE **July 19 2003**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STRAUSS, WALTER 9882 ERICA CT. BOCA RATON FL 33496
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHECKOWITZ, BRUCE 215 E 68TH ST., APT. 30-F NEW YORK NY 10021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WEISNER, NEAL 80 BAY ST. LANDING, APT. 1K STATEN ISLAND NY 10301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DARVISHZADEH, RAMIN D 1 BROOKBRIDGE RD. GREAT NECK NY 11021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STRAUSS, WALTER 18058 Clearbrook Circle BOCA RATON, FL. 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** *W. Strauss* **W. STRAUSS** DATE **7/19/03** DAYTIME PHONE **(305) 724 4143**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/03)