


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 21, 2006 8:00 am**  
**Secretary of State**

03-01-2006 90034 004 \*\*\*150.00

<b>DOCUMENT # S18904</b> 1. Entity Name GALLERY ART GROUP, INC.	
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Principal Place of Business 20633 BISCAYNE BLVD. AVENTURA, FL 33180	Mailing Address 20633 BISCAYNE BLVD. AVENTURA, FL 33180
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02162006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-1762098	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  HENDEL, KEN 20633 BISCAYNE BLVD. AVENTURA, FL 33180
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**DO NOT WRITE IN THIS SPACE**

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:  DATE: 2/17/06

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

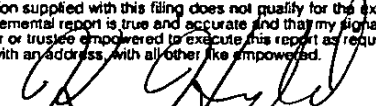
**FILE NOW!!! FEB IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HENDEL, KEN 20633 BISCAYNE BLVD AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP HENDEL, AMY 19958 NE 5TH CT. MIAMI, FL 33179
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	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  DATE: 3/17/06 305-932-6166

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR



ATTACHMENT

66006208

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 3, 2006

GALLERY ART GROUP, INC.  
20633 BISCAYNE BLVD.  
AVENTURA, FL 33180

Subject: GALLERY ART GROUP, INC.

Reference Number: S18904

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION