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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000002949

LA GALERIA FINE ART, INC.

Principal Place of	Business
300 MALAGA AVE	

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90188 020 ***155.00



Principal Place	e of Business	Mailing Address							
300 MALAGA A	VE	300 MALAGA AVE							
CORAL GABLES	5 FL 33134	CORAL GABLES FL 33134			DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE			
US	US		Date Incorporated or Qualifed						
					11/09/1992				
		2a Mailing Address			4. FEI Number	Apr	olied For		
- an	ace of Business	2a. Mailing Address		2110	65-0367778	<u> </u>	Applicable		
21 000	THAGE HUE.	26 300 Hac	<u>u </u>	~~~		\$8.75 A			
Suite, Apt. :	#, etc.				5. Certificate of Status Desired	Fee Rec	_		
22	~ ~ ~	City & State	.//		6. Election Campaign Financing	\$5.00			
City & State	O GARDON Va	\vdash \wedge	al (c	ra Colle	Trust Fund Contribution	Added to			
23 COKA Zip	Country	28 319 . DL	Country		This corporation owes the current year Interest.				
24 3313	3U 25	29 30	,		Personal Property Tax.		□No		
24 001	9. Name and Address of Current				10. Name and Address of New Registered	Agent			
5. Name and Address of Current Registered Agent		81	Name						
ROD	RODRIGUEZ, JOSE M		_	<u> </u>	(D.O. D. Al. Louis Not Associatio)				
	MALAGA AVE		82	Street Address (P.O. Box Number is Not Acceptable)					
	AL GABLES FL 33146		83						
			84	City	eg ar ex en en jeue 🗗	85 Zip C	ode		
44 Durayanti	to the provisions of Pastions 607 0502	and 607 1508 Florida Statutes 1	he abov	e-named i	corporation submits this statement for the purpose of	changing its	registered		
office or re	egistered agent or both in the State o	f Florida. Such change was autho	nzea by	the como	pration's board of directors. I hereby accept the appoint	ntment as reg	jistered		
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Florida	Statutes						
SIGNATURE		MOTE Page	etored Ago	n eudennia te	equired when reinstating) DATE				
12.	Signature, typed or printed name of registered agent OFFICERS ANI		13.	it aignoture is	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12		
TITLE	PST	☐ DELETE	1.1 TITLE			Change	Addition		
NAME	RODRIQUEZ, JOSE M.		1.2 NAME						
STREET ADDRESS	300 MALAGA AVE			TADDRESS					
	CORAL GABLES FL 33134		1.4 CITY-S						
CITY-ST-ZIP TITLE	COTIAL CADLLOTE SCHOOL	☐ DELETE	2.1 TITLE	1 21		☐ Change	☐ Addition		
NAME		i i	2.2 NAME						
				T ADDRESS					
STREET ADORESS			2.4 CITY-				}		
CITY-ST-ZIP		☐ DELETE	3.1 TITLE	21*£JF		Change	Addition		
			3.2 NAME						
NAME				TADDRESS			l		
STREET ADDRESS			3.4. CITY-						
CITY-ST-ZIP		☐ DELETE	4.1 TITLE	31-2IF	127	☐ Change	Addition		
TITLE		_ 5212112	4. 2 NAME			_, -			
NAME				TADDRESS					
STREET ADDRESS			4.4 CITY-S						
CITY-ST-ZIP		□ DELETE	5.1 TITLE	11-217		Change	Addition		
TITLE			5.2 NAME						
NAME				T ADDRESS					
STREET ADDRESS		1	5.4 CITY-S						
CITY-ST-ZIP		DELETE :	6.1 TITLE			Change	Addition		
TITLE		☐ DELETE	6.2 NAME						
NAME			V.Z HUNNE		'				

CITY-ST-ZIP 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 annual report or supplemental annual 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 12 or Block 13 if changent, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS