

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000138372

**FILED  
May 05, 2006  
Secretary of State**

**Entity Name:** GALAPAGOS DEVELOPMENT CORP.

**Current Principal Place of Business:**

10408 WEST MCNAB RD  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

2831 SW 190 AVENUE  
MIRAMAE, FL 33029

**New Mailing Address:**

**FEI Number:** 06-1760823      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LOPEZ, FERNANDO A  
2831 SW 190 AVE  
MIRAMAR, FL 33029      US

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

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: AGUIRRE, FRANCIS J  
Address: 5265 SW 171 AVE  
City-St-Zip: MIRAMAR, FL 33027

Title: DVS ( ) Delete  
Name: LOPEZ, FERNANDO A  
Address: 2831 SW 190 AVE  
City-St-Zip: MIRAMAR, FL 33029

Title: D ( ) Delete  
Name: AGUIRRE, GAINNA M  
Address: 5265 SW 171 AVE  
City-St-Zip: MIRAMAR, FL 33027

Title: D ( ) Delete  
Name: LOPEZRE, SILVANA M  
Address: 2837 SW 190 AVE  
City-St-Zip: MIRAMAR, FL 33027

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: FERNANDO A. LOPEZ

DVS

05/05/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date