

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006545

Entity Name: TORTI GALLAS AND PARTNERS, INC.**Current Principal Place of Business:**1300 SPRING ST.
STE 400
SILVER SPRING, MD 20910**Current Mailing Address:**1300 SPRING ST.
STE 400
SILVER SPRING, MD 20910 US**FEI Number: 52-0847751****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	WALLACH, ROBERT
Address	1300 SPRING ST. STE 400
City-State-Zip:	SILVER SPRING MD 20910

Title	DIRECTOR
Name	WALLACH, ROBERT
Address	1300 SPRING ST. STE 400
City-State-Zip:	SILVER SPRING MD 20910

Title	DIRECTOR
Name	GALLAS, THOMAS
Address	1300 SPRING ST. STE 400
City-State-Zip:	SILVER SPRING MD 20910

Title	DIRECTOR
Name	TORTI, JOHN
Address	1300 SPRING ST. STE 400
City-State-Zip:	SILVER SPRING MD 20910

Title	TREASURER
Name	GALLAS, THOMAS
Address	1300 SPRING ST. STE 400
City-State-Zip:	SILVER SPRING MD 20910

Title	PRESIDENT
Name	TORTI, JOHN
Address	1300 SPRING ST. STE 400
City-State-Zip:	SILVER SPRING MD 20910

I hereby 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 all other like empowered.

SIGNATURE: THOMAS GALLAS**TREASURER****04/06/2018**

Electronic Signature of Signing Officer/Director Detail

Date