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

**PROFIT** CORPORATION **ANNUAL REPORT** 

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 358197

GALT MILE PROPERTIES, INC.



**FILED** May 06 1998 8:00am Secretary of State

Change

Change

Change

Addition

Addition

Addition

Adhars Changes Expertivatoril 9-1998		
Principal Place of Business Mailing Address	i didit Bibit Bibit fifelt läfft	
3414-A N. 00. 3414-A N. 00. 3414-D.		
FT. LAUDERD & FL 33308-7119  FT. LAUDERD & 33308-7119  FT. LAUDERD & 33308-7119  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified.		
3356 N.E. 34 St 3356 N.E. 34 STREET DO NOT WRITE IN THIS SPACE		
FT.LA UDERDALE, FL. 33308 FT.LA UDERDALE, FL. 33308 3. Date Incorporated or Qualified 01/16/1970		
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For	
26 59-1289746	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.	\$8.75 Additional	
22 27	Fee Required	
City & State City & State 6. Election Campaign Financing	<b>\$5.00</b> May Be	
28 Trust Fund Contribution	Added to Fees	
Zip Country Zip Country 8. This corporation owes or has paid the cu	_ ' _ '	
[E4] [20] [20] [20]	Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  CITTA STEVEN I		
OITA, SIEVEN J.		
C/O SWEETWOOD  82 Street Address (P.O. Box Number is Not Acceptable)	82 Street Address (P.O. Box Number is Not Acceptable)	
5140 N.E. 26 AVENUE		
FT. LAUDERDALE FL 33308		
84 City	85 Zip Code	
FL FL	<u>.   .  </u>	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered		
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.		
SIGNATURE	<u> </u>	
Signature typed or protect name of registered agent and talls if applicable (NOT Registered Agent signature required when reinstating) DATE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 10	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TITLE PD DELETE 1.1 TITLE	Change Addition	
OUT A OTTOTAL I	onunge roundi	
ALC CHITCHMOOD FAACALT OC AVENUE		
ET LAMPEDDALE CI		
CITY-ST-ZIP FI. LAUDERUALE FL 1.4 CITY-ST-ZIP  TITLE STD DELETE 2.1 TITLE	Change Addition	
ANTA LIPATUED	C cutting C variable	
AND CHARTCHOOD TAKE OF TAKENIE		
ET LAUDEDDALE EL		
CITY-ST-ZIP	Change Addition	

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Further certify that the information indicated on this annual report or suppliemental 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 changed, or on an attachment with an address.

32 NAME 3.3 STREET ADDRESS

4.1 TITL€

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.4. CITY - S1 - ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

**6.3 STREET ADDRESS**