2004 FOR PROFIT CORPORATION

## **ANNUAL REPORT FILED** Apr 07, 2004 08:00 AM Secretary of State **DOCUMENT # 636620** 1. Entity Name GALLERIA PROPERTIES, INC. Principal Place of Business Mailing Address 2715 E. OAKLAND PARD BLVD. 2715 E. OAKLAND PARD BLVD. SUITE 100 SUITE 100 FT, LAUDERDALE, FL 33306 FT. LAUDERDALE, FL 33306 CR2E034 (10/03) 04052004 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEl Number Applied For 59-1939895 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SENESI, FRED P DO NOT WRITE 2715 E. OAKLAND PARK BLVD, . . SUITE 100 IN THIS SPACE FT. LAUDERDALE, FL 33306 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. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees U00000105911 10. OFFICERS AND DIRECTORS TITLE SENESI, FRED P NAME STREET ADDRESS 2715 E. OAKLAND PARD BLVD., SUITE 100 CITY-ST-ZIP FT. LAUDERDALE, FL 33306 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TETLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my pame appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other

SIGNATURE:

71718 NAME STREET ADDRESS CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE