

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K81847

(1)

1. Corporation Name

GALERIE MIHALIS, INC.



Principal Place of Business

365 EAST PALMETTO PARK ROAD
BOCA RATON FL 33432

Mailing Address

365 EAST PALMETTO PARK ROAD
BOCA RATON FL 33432

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	Country	30	Country

3. Date Incorporated or Qualified

04/17/1989

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0126620

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAPITAL CONNECTION, INC.
417 EAST VIRGINIA STREET, SUITE 1
TALLAHASSEE FL 32302

81 Name JEN D. BLAKESBERG
82 Street Address (P.O. Box Number is Not Acceptable)
951 S.W. 4TH AVENUE
83
84 City BOCA RATON FL 85 Zip Code 33432

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

Signature of person named in Block 9 or 10, if applicable

Signature of New Registered Agent, if applicable

DATE

5/24/96

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	GOURGOURINIS, PEGGY	
STREET ADDRESS	5503 FOX HOLLOW DR	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	ST	☐ DELETE
NAME	GOURGOURINIS, PEGGY	
STREET ADDRESS	5503 FOX HOLLOW DR	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	V	☒ DELETE
NAME	GOURGOURINIS, MIHALIS	
STREET ADDRESS	5503 FOX HOLLOW DR	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN *2

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 checked, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 24/96 (407) 367-1532

CR2E034 (12/95)