

**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 23, 2004  
Secretary of State**

DOCUMENT# L03000002848

Entity Name: GALLOWAY OFFICE LLC

**Current Principal Place of Business:**

8842 SW 16 ST.  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

8842 SW 16 ST.  
MIAMI, FL 33165

**New Mailing Address:**

FEI Number: 33-1047664      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HERNANDEZ, DOMINGO  
8842 SW 16 ST.  
MIAMI, FL 33165

**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

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: HERNANDEZ, DOMINGO J PRES.  
Address: 8842 SW 16 ST  
City-St-Zip: MIAMI, FL 33165

Title: MGRM ( ) Change (X) Addition  
Name: LAFUENTE, AMAYA M VICE-P  
Address: 8842 SW 16 ST  
City-St-Zip: MIAMI, FL 33165

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DOMINGO HERNANDEZ

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04/23/2004

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date