

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000007604

Entity Name: INVERSIONES GAL, LLC

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2344 NE 12 STREET  
SUITE 6  
POMPANO BEACH, FL 330623734 US

**New Principal Place of Business:**

**Current Mailing Address:**

2344 N E 12TH STREET  
SUITE 6  
POMPANO BEACH, FL 330623734 US

**New Mailing Address:**

FEI Number: 77-0594532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CIFUENTES, MARIA C ESQ  
4300 BISCAYNE BLVD. SUITE 204  
MIAMI, FL 33137 US

**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/MANAGERS:**

Title: MGRM  
Name: LUCCHESI, GAETANO  
Address: 2344 N E 12TH STREET  
City-St-Zip: POMPANO BEACH, FL 330623734 US

Title: MGR  
Name: DE SARIO, DINO FRANCISCO  
Address: 2344 NE 12 STREET #6  
City-St-Zip: POMPANO BEACH, FL 330623734 US

Title: MGR  
Name: SALAM, RAAFAT ABDUL  
Address: 2344 NE 12 STREET #6  
City-St-Zip: POMPANO BEACH, FL 330623734 US

Title: MGRM  
Name: LA ROCCA, VICENTE  
Address: C LOS SERVICIOS RES. LAS BRISAS  
City-St-Zip: PISO 6 #62B URB LOS MANGOS,

I hereby 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: GENE CICARELLI

MGR

01/12/2011

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