

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000072340

1. Entity Name
GALLOWAY PROPERTIES, LLC.



Principal Place of Business

**351 NW LE JEUNE ROAD
SUITE 600
MIAMI, FL 33126**

Mailing Address

**351 NW LE JEUNE ROAD
SUITE 600
MIAMI, FL 33126**

DO NOT WRITE IN THIS SPACE



04092008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
71-1011477

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BOLOOKI, HAMID
351 NW LE JEUNE ROAD
SUITE 600
MIAMI, FL 33126**

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BOLOOKI, HAMID
STREET ADDRESS	351 NW LE JEUNE ROAD STE 600
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	MGR
NAME	HERNANDEZ, MOISES E
STREET ADDRESS	351 NW LE JEUNE ROAD STE 600
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	MGR
NAME	FERRER, JOSE P
STREET ADDRESS	351 NW LE JEUNE ROAD STE 600
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	MGR
NAME	BEHAR, SIMON
STREET ADDRESS	351 NW LE JEUNE ROAD STE 600
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000929836
05/21/08-80085-010 138.75

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Hamid B. Looki* / **HAMID BOLOOKI**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/9/08

Date

305-643-5040

Daytime Phone #