

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000072806

Entity Name: GALA INSURANCE, LLC

FILED
Mar 31, 2010
Secretary of State

Current Principal Place of Business:

6135 NW 167TH
10
HIALEAH, FL 33015

New Principal Place of Business:

29990 S DIXIE HWY
HOMESTEAD, FL 33033

Current Mailing Address:

6135 NW 167TH
10
HIALEAH, FL 33015

New Mailing Address:

PO BOX 772573
MIAMI, FL 33177

FEI Number: 26-3078033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORTA, ARIADNA
13945 SW 158 TERRACE
MIAMI, FL 33177 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: PD
Name: DORTA, ARIADNA
Address: 29990 S DIXIE HWY
City-St-Zip: MIAMI, FL 33033 US

Title: MGR
Name: MENA, LAZARO
Address: 29990 S DIXIE HWY
City-St-Zip: HOMESTEAD, FL 33033 US

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: LAZARO MENA

PD

03/31/2010

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