

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000007196

FILED  
Jan 10, 2012  
Secretary of State

Entity Name: GALAXY EDUCATION INC.

**Current Principal Place of Business:**

441 33RD STREET NORTH  
APT 508  
ST. PETERSBURG, FL 33713

**New Principal Place of Business:**

**Current Mailing Address:**

441 33RD STREET NORTH  
APT 508  
ST. PETERSBURG, FL 33713

**New Mailing Address:**

FEI Number: 45-3533747

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

COSKUN, SIRIN DR.  
31119 US HIGHWAY 19 NORTH  
PALM HARBOR, FL 34684 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: COSKUN, SIRIN DR.  
Address: 31119 US HIGHWAY 19 NORTH  
City-St-Zip: PALM HARBOR, FL 34684 US

Title: VP  
Name: DEMIR, FATIH  
Address: 10301 CASA PALARMO DR., APT # 6  
City-St-Zip: RIVERVIEW, FL 33578 US

Title: SECR  
Name: YILDIRIM, DERYA MD  
Address: 6947 SUPERIOR ST. CIRCLE  
City-St-Zip: SARASOTA, FL 34243 US

Title: B.M.  
Name: BALLA, SHEMZI  
Address: 215 BAYSIDE DR.  
City-St-Zip: CLEARWATER, FL 33767 US

Title: B.M.  
Name: CALISKAN, FETHULLAH  
Address: 15027 ARBOR RESERVE CR#205  
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SIRIN COSKUN

P

01/10/2012

Electronic Signature of Signing Officer or Director

Date