

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
 CORPORATION
 ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N33541 (6)

1. Corporation Name

GALLOWAY AND MILLER ESTATES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

6800 SW 40TH STREET
 P.O. BOX 141
 MIAMI FL 33155
 US

6800 SW 40TH ST.
 P.O. BOX 141
 MIAMI FL 33155
 US

3. Date Incorporated or Qualified

08/02/1989

3a. Date of Last Report

03/13/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

65-0286998

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOLIS, NORBERTO
 8835 SW 57TH ST.
 MIAMI FL 33173

81 Name

PINEIRO, EDUARDO

82 Street Address (P.O. Box Number is Not Acceptable)

8841 S.W. 58 Street

83

84 City

Miami

FL

85 Zip Code

33173

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Eduardo Pineiro

Eduardo Pineiro

8/1/96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
DP	MEDEROS, ANTONI	8825 SW 60TH ST.	MIAMI FL	<input checked="" type="checkbox"/>
VD	PEREZ, RENATO	5851 SW 88TH COURT	MIAMI FL	<input checked="" type="checkbox"/>
VD	RODRIGUEZ, MJ	5955 SW 60TH STREET	MIAMI FL	<input checked="" type="checkbox"/>
SD	MATA, LUIS M.	5680 SW 88TH PLAACE	MIAMI FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
P/D	PINEIRO, EDUARDO	8841 S.W. 58 Street	Miami, FL 33173	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VP/D	LLERANDI, VICTOR	8830 S.W. 58 Street	Miami, FL 33173	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VP/D	CORZO, ENRIQUE	5881 S.W. 88 Court	Miami, FL 33173	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S/D	SEGARRA, SERGIO	5986 S.W. 88 Place	Miami, FL 33173	<input type="checkbox"/>	<input checked="" type="checkbox"/>
T/D	INGLES, ROLANDO	8845 S.W. 57 Street	Miami, FL 33173	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Eduardo Pineiro
 EDUARDO PINEIRO - Pres.

8/1/96

Date

(305) 274-7731

Daytime Phone #

CR2E037 (3/96)