

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49834

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: GALERIA TWO CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

14411 COMMERCE WAY  
SUITE 240  
HIALEAH, FL 33016 US

## New Principal Place of Business:

14411 COMMERCE WAY  
SUITE 240  
MIAMI LAKES, FL 33016 US

## Current Mailing Address:

14411 COMMERCE WAY  
SUITE 240  
HIALEAH, FL 33016 US

## New Mailing Address:

14411 COMMERCE WAY  
SUITE 240  
MIAMI LAKES, FL 33016 US

FEI Number: 65-0352631

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZARATE, JORGE G CAM  
C/O COSMOS MANAGEMENT SERVICES  
14411 COMMERCE WAY, STE 240  
MIAMI LAKES, FL 33016 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: PD ( ) Delete  
Name: ALEGRIA, MARIA  
Address: 2212 WEST 74 PLACE  
City-St-Zip: HIALEAH, FL 33016

Title: TD ( ) Delete  
Name: GROSSO, OSWALDO  
Address: 2207 WEST 74 PLACE  
City-St-Zip: HIALEAH, FL 33016

Title: SD ( ) Delete  
Name: RODRIGUEZ, YANET  
Address: 2218 WEST 74 PLACE  
City-St-Zip: HIALEAH, FL 33016

Title: D ( ) Delete  
Name: HERRERA, IVONE  
Address: 14411 COMMERCE WAY, 240  
City-St-Zip: MIAMI LAKES, FL 33016

Title: D ( ) Delete  
Name: RODRIGUEZ, ANGEL  
Address: 2206 WEST 74 PLACE  
City-St-Zip: HIALEAH, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARIA ALEGRIA

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date