

2001 UNIFORM BUSINESS REPORT (UBR)

5/2

FILED
Jun 25, 2001 8:00 am
Secretary of State

05-23-2001 91162 014 ***150.00

DOCUMENT # P00000032805

1. Entity Name

GALA CORPORATION

Principal Place of Business

Mailing Address

The Centre Building
 9900 Stirling Road
 Suite 222
 Hollywood, FL 33024

The Centre Building
 9900 Stirling Road
 Suite 222
 Hollywood, FL 33024

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0996898

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Ileana Arias Tovar, Esq.
 9900 Stirling Road
 Hollywood, FL 33024

Name Jose G. Tovar

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

9900 Stirling Road
 Suite 222

City

Hollywood

FL

Zip Code

33024

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.

SIGNATURE

Signature, typed or printed name of Registered Agent and if not applicable.

(If D: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

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FILE NOW!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$350.00
 Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

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\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P T D
 NAME Jose G. Tovar
 STREET ADDRESS 9900 Stirling Road, Suite 222
 CITY-ST-ZIP Hollywood, FL 33024

☐ Delete

TITLE VP S D
 NAME Marie Sol Pardo
 STREET ADDRESS 9900 Stirling Road, Suite 222
 CITY-ST-ZIP Hollywood, FL 33024

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other the empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

José G. Pardo 4/23/01 (954) 364-6266

CR2E034 (11/00)