2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000057309

City-St-Zip:

MIAMI, FL 33145

Entity Name: MEDITERRANEAN GALLERY, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
3181 SW 13TH STREET 412 MIAMI, FL 33145			3178 SW 8TH STF MIAMI, FL 33135	3178 SW 8TH STREET MIAMI, FL 33135	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
3181 SW 13TH STREET 412 MIAMI, FL 33145			3178 SW 8TH STF MIAMI, FL 33135	3178 SW 8TH STREET MIAMI, FL 33135	
FEI Number	: 65-1016171	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
412 MIAMI, FL The above	e of Florida. ´ RE:	submits this statement for the particles in the particles and the particles are supported as a support of the supported as a support of the supported as a support		tered office or registered agent, or both, Date	
Election Car		g Trust Fund Contribution ().		2 4.12	
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () ROSES, FRANC 3181 SW 13TH MIAMI, FL 331	STREET #412	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () ACOSTA, JORG 3181 SW 13TH MIAMI, FL 331	STREET #412	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SD () INDA, JAVIER 3181 SW 13TH	Delete STREET #412	Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: FRANCISCO ROSES PD 04/29/2005