2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051332

GOER, STACEY

120 SE 5TH AVE. #218

BOCA RATON, FL 33432

Name:

Address:

City-St-Zip:

Entity Name: PROPERTIES GALORE, INC.

FILED Apr 14, 2007 Secretary of State

•		,		
Current Principal Place of Business:			New Principal Place of Business:	
	HAVE, SUITE ON, FL 3343			
Current Ma	ailing Addres	ss:	New Mailing Address	::
	HAVE, SUITE ON, FL 3343			
FEI Number:	65-1098047	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:
BOCA RAT	HAVE. ,#218 ON, FL 3343 named entity:		purpose of changing its registered	d office or registered agent, or both,
in the State	of Florida.			
SIGNATUR		i. Oissant as af Davista at As	1	Politi
		nic Signature of Registered Ag	gent	Date
Election Cam	paign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (GOER, STACE 120 SE 5TH AV BOCA RATON,	E, SUITE 218	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V (ISRAEL, JOEL 120 SE 5TH AV BOCA RATON,	E, SUITE 218	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S (ISRAEL, JOEL 120 SE 5TH AV BOCA RATON,		Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	т () Delete	Title:	() Change () Addition

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

Name:

Address:

City-St-Zip:

SIGNATURE: STACEY GOER P 04/14/2007