

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000092243

Entity Name: GALLARES INVESTMENTS, INC

FILED  
Apr 27, 2007  
Secretary of State

## Current Principal Place of Business:

3610 YACHT CLUB DRIVE  
716  
AVENTURA, FL 33180

## New Principal Place of Business:

## Current Mailing Address:

3610 YACHT CLUB DRIVE  
716  
AVENTURA, FL 33180

## New Mailing Address:

FEI Number: 65-1139169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAMIS, JAIME OLIVER  
3610 YACHT CLUB DRIVE  
716  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

OLIVER, JAIME  
3610 YACHT CLUB DRIVE  
716  
AVENTURA, FL 33180 US

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: JAIME OLIVER

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: RAMIS, JAIME OLIVER  
Address: 3610 YACHT CLUB SUITE 716  
City-St-Zip: AVENTURA, FL 33180

Title: VPD ( ) Delete  
Name: SERRANO LYTON, VIOLETA  
Address: 3610 YACHT CLUB SUITE 716  
City-St-Zip: AVENTURA, FL 33180

Title: TD ( ) Delete  
Name: OLIVER, ADRIANA  
Address: 3610 YACHT CLUB SUITE 716  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: OLIVER, JAIME  
Address: 3610 YACHT CLUB DRIVE SUITE 716  
City-St-Zip: AVENTURA, FL 33180

Title: VPD (X) Change ( ) Addition  
Name: SERRANO LYNTON, VIOLETA  
Address: 3610 YACHT CLUB DRIVE SUITE 716  
City-St-Zip: AVENTURA, FL 33180

Title: TD (X) Change ( ) Addition  
Name: OLIVER, ADRIANA  
Address: 3610 YACHT CLUB DRIVE SUITE 716  
City-St-Zip: AVENTURA, FL 33180

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAIME OLIVER

PSTD

04/27/2007

Electronic Signature of Signing Officer or Director

Date