

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 07, 2007 8:00 am
Secretary of State

03-07-2007 90017 019 ***150.00

DOCUMENT # P01000118212
1. Entity Name
Galaxy Plus 2000, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4106 Johnson Street Suite, Apt. #, etc.		3. Mailing Address 3146 NW 68th Street Suite, Apt. #, etc. Suite No. 1	
City & State Hollywood, FL		City & State Fort Lauderdale, Florida	
Zip 33021	Country USA	Zip 33309-1206	Country USA

4. FEI Number 01-0566976	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Fritz L. Blaise	
Street Address (P.O. Box Number is Not Acceptable) 4106 Johnson Street	
City Hollywood	Zip Code 33021

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Fritz L. Blaise **Fritz L. Blaise** **2/20/2007**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/CEO/Chairperson-Board Fritz L. Blaise 4106 Johnson Street Hollywood, Florida 33060
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Advisor/Ex-officio Member Clifton H. Rodriguez, MPA, CPA, CIA 3146 NW 68th Street Fort Lauderdale, Florida 33309-1206
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Fritz L. Blaise **Fritz L. Blaise, CEO** **2/20/2007** **(954)964-2362**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #