

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048343

Entity Name: GALY ENTERPRISES, INC.

FILED  
Apr 14, 2009  
Secretary of State

**Current Principal Place of Business:**

1175 NE MIAMI GARDENS DR.  
SUITE 506  
MIAMI, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

1175 NE MIAMI GARDENS DR.  
SUITE 506  
MIAMI, FL 33179

**New Mailing Address:**

FEI Number: 04-3653888      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NAIMAN, DEMIAN G  
1175 NE MIAMI GARDENS DR.  
SUITE 506  
MIAMI, FL 33179 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: NAIMAN, DEMIAN G  
Address: 1175 NE MIAMI GARDENS DR APT. 506  
City-St-Zip: MIAMI, FL 33179

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: CALDERON, LILIANA J VP  
Address: 1175 NE MIAMI GARDENS DR APT 506  
City-St-Zip: MIAMI, FL 33179

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: DEMIAN NAIMAN

SD

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date