

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90244 031 ***150.00

DOCUMENT # P02000087042

1. Entity Name

GALAPOGOLS, INC.



Principal Place of Business

**4750 N FEDERAL HWY STE 202
FT LAUDERDALE FL 33308**

Mailing Address

**4750 N FEDERAL HWY STE 202
FT LAUDERDALE FL 33308**

2. Principal Place of Business

3200 Port Royale Drive N.

3. Mailing Address

3200 Port Royale Drive N.

Suite, Apt. #, etc.

1402

Suite, Apt. #, etc.

1402

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

33308-7806

Country

Broward

Zip

33308-7806

Country

Broward



MOORE

CR2E034 (11/03)

4. FEI Number

35-2185493

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ROSENBERG, ARTHUR R
4750 N FEDERAL HWY STE 202
FT LAUDERDALE FL 33308**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DPST** ☐ Delete
NAME **HEISS, JUDY**
STREET ADDRESS **4750 N FEDERAL HWY STE 202**
CITY-ST-ZIP **FT LAUDERDALE FL 33308**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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CITY-ST-ZIP

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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3200 Port Royale Drive N. #1402**
CITY-ST-ZIP **Ft. Lauderdale, FL 33308-7806**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Judy L. Heiss
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Judy Heiss, Pres.

4/24/04

(954) 771-0501

Date

Daytime Phone #