

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90259 036 ***150.00

DOCUMENT # P02000099457

1. Entity Name

GALMOR REAL ESTATE INVESTMENTS, INC.



Principal Place of Business

% 1390 BRICKELL AVENUE
SUITE 200
MIAMI FL 33131

Mailing Address

% 1390 BRICKELL AVENUE
SUITE 200
MIAMI FL 33131

2. Principal Place of Business

16299 Biscayne Blvd.

3. Mailing Address

16299 Biscayne Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

North Miami Beach, FL

City & State

North Miami Beach, FL

4. FEI Number

42-1552481

Applied For

Not Applicable

Zip

33160

Country

US

Zip

33160

Country

US

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASTILLO B., ALVARO
1390 BRICKELL AVENUE
SUITE 200
MIAMI FL 33131

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, 2003 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME GALVAN, GERMAN
STREET ADDRESS % 1390 BRICKELL AVENUE SUITE 200
CITY-ST-ZIP MIAMI FL 33131

TITLE D ☒ Change ☐ Addition
NAME German Galvan
STREET ADDRESS 16299 Biscayne Blvd.
CITY-ST-ZIP North Miami Beach, FL 33160

TITLE D ☐ Delete
NAME MORENO, MARCELO
STREET ADDRESS % 1390 BRICKELL AVENUE SUITE 200
CITY-ST-ZIP MIAMI FL 33131

TITLE D ☒ Change ☐ Addition
NAME Marcelo Moreno
STREET ADDRESS 16299 Biscayne Blvd.
CITY-ST-ZIP North Miami Beach, FL 33160

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Marcelo Moreno

4/28/03

(305) 949-6400

Date

Daytime Phone #

CR2E034 (10/02)