

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025358

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: GALLERIA LALLOUZ, CORP.

**Current Principal Place of Business:**

PO BOX 460940  
FT. LAUDERDALE, FL 33346

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 460940  
FT. LAUDERDALE, FL 33346

**New Mailing Address:**

FEI Number: 35-2229313      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MCGEE, M. DAVID. ESQ.  
400 S.E. 8TH STREET  
FT. LAUDERDALE, FL 33316      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: PD ( ) Delete  
Name: LALLOUZ, RHONDA  
Address: 1009 S.E. 6TH STREET  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VD ( ) Delete  
Name: LALLOUZ, ALAIN  
Address: 1009 S.E. 6TH STREET  
City-St-Zip: FT. LAUDERDALE, FL 33301

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

Title: PD (X) Change ( ) Addition  
Name: LALLOUZ, RHONDA  
Address: P.O. BOX 460940  
City-St-Zip: FT. LAUDERDALE, FL 33346

Title: VD (X) Change ( ) Addition  
Name: LALLOUZ, ELYAHOU  
Address: P.O. BOX 460940  
City-St-Zip: FT. LAUDERDALE, FL 33346

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RHONDA LALLOUZ

PD

04/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date