2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000073070

Entity Name: GALLO ENTERPRISES, INC.

FILED Apr 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

956 20TH STREET 1910 82 AVENUE

SUITE 201 SUITE 106
VERO BEACH, FL 32960 US VERO BEACH, FL 32966

Current Mailing Address: New Mailing Address:

956 20TH STREET 1910 82 AVENUE

SUITE 201 SUITE 106

VERO BEACH, FL 32960 US VERO BEACH, FL 32966 US

FEI Number: 20-1083189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GALLO, ROSARIO M
956 20TH STREET
SUITE 201
GALLO, ROSARIO M
1910 82 AVENUE
SUITE 106

VERO BEACH, FL 32960 US VERO BEACH, FL 32966 US

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: ROSARIO M GALLO 04/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: P () Delete Title: P (X) Change () Addition
Name: GALLO, ROSARIO M

Address: GALLO, ROSARIO M

Address: 1010 93 AVENUE SUITE 106

 Address:
 956 20TH STREET
 SUITE 201
 Address:
 1910 82 AVENUE
 SUITE 106

 City-St-Zip:
 VERO BEACH, FL 32960 US
 City-St-Zip:
 VERO BEACH, FL 32966 US

Name: THOMA, AMY J Name: THOMA, AMY J

 Address:
 956 20TH STREET
 SUITE 201
 Address:
 1910 82 AVENUE
 SUITE 106

 City-St-Zip:
 VERO BEACH, FL
 32960 US
 City-St-Zip:
 VERO BEACH, FL
 32966 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ROSARIO M. GALLO P 04/10/2006