

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000000006

Entity Name: GARLYN ENTERPRISES INC.

FILED  
Apr 25, 2009  
Secretary of State

## Current Principal Place of Business:

5030 CHAMPION BLVD, G-6  
PMB 166  
BOCA RATON, FL 33496

## New Principal Place of Business:

9096A S.W. 20TH STREET  
BOCA RATON, FL 33428

## Current Mailing Address:

5030 CHAMPION BLVD, G-6  
PMB 166  
BOCA RATON, FL 33496

## New Mailing Address:

9096A S.W. 20TH STREET  
BOCA RATON, FL 33428

FEI Number: 20-0180785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SIEGAL, GARY  
5030 CHAMPION BLVD. G-6  
PMB 166  
BOCA RATON, FL 33496 US

## Name and Address of New Registered Agent:

SIEGAL, GARY  
2139 HAWTHORNE STREET  
SARASOTA, FL 34239 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:

04/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SIEGAL, GARY  
Address: 5030 CHAMPION BLVD. G-6, PMB166  
City-St-Zip: BOCA RATON, FL 33496

Title: ST ( ) Delete  
Name: SIEGAL, LYNNIE  
Address: 5030 CHAMPION BLVD. G-6, PMB166  
City-St-Zip: BOCA RATON, FL 33496

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SIEGAL, GARY  
Address: 2139 HAWTHORNE STREET  
City-St-Zip: SARASOTA, FL 34239

Title: ST (X) Change ( ) Addition  
Name: SIEGAL, LYNNIE  
Address: 2139 HAWTHORNE STREET  
City-St-Zip: SARASOTA, FL 34239

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: GARY SIEGAL

PRES

04/25/2009

Electronic Signature of Signing Officer or Director

Date