## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000022417

Entity Name: GALYNDYL, INC.

City-St-Zip:

MIAMI, FL 33157

FILED Apr 01, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	101ST AVE BAY, FL 33157				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	101ST AVE BAY, FL 33157				
FEI Number	: 20-8595084	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
19800 SW	S, ANDREW 101ST AVE BAY, FL 33157	US			
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/D () JENNINGS, ANI 19800 SW 1018 CUTLER BAY, F	ST AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP/T () JENNINGS, ANI 19800 SW 1018 CUTLER BAY, F	ST AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () JENNINGS, ANI 19800 SW 1013 CUTLER BAY, F	ST AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	VPT () DUKE, ASHLEY 19800 SW 1019		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: ANDREW JENNINGS P/D 04/01/2008