

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000088618

FILED
Nov 03, 2008
Secretary of State

Entity Name: GALLOWAY ADULT CARE, INC.

Current Principal Place of Business:

10740 SW 87TH AVENUE
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

10740 SW 87TH AVENUE
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 26-0674163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIKE'S TAX & ACCOUNTING, INC.
269 N. UNIVERSITY DRIVE
SUITE I
PEMBROKE PINES, FL 33024 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: MICHAEL SARABJIT

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: SINNARAJAH, KUSHALAKUMARI
Address: 10740 SW 87TH AVENUE
City-St-Zip: MIAMI, FL 33176 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KUSHALAKUMARI SINNARAJAH

P

11/03/2008

Electronic Signature of Signing Officer or Director

Date