FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P13151

RICHARD M. GALKIN ASSOCIATES, INC.

·							
Principal Place	e of Business	Mailing Address	•		# INDEFINAL INI JIDAN ILEDI JEDU DIKAL JIDI DI	DIS MAMAY MYNYS MAMED NA	eli etelt inni
654 BOCA MAR BOCA RATON I US	RINA COURT	654 BOCA MARINA COUR BOCA RATON FL 33487 US	т .		: . DO NOT WRITE IN T	HIS SPACE	
		•			3. Date Incorporated or Qualifed		
	~ . ~				02/06/1987		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	App	lied For
21		26			13-3051784	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A Fee Red	
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country		8. This corporation owes the current year		_
24	. 25	29	30		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent	8	d Mana	10. Name and Address of New Register	ed Agent	
: GALI	KIN, RICHARD M.		l°	1 Name			
654	BOCA MARINA COURT	80	8	2 Street A	Address (P.O. Box Number is Not Acceptable)		
BOC	A RATON FL 33487		8	3	(1) 整件基础的数据 (2) (2)		
			8	4 City	1743 M. C.	85 Zip C	ode
and the second of the second	• . • . • . • . • . • . • . • . • . • .					<u>L </u>	
		1.005 (500) 51 (1) 51			1		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508; Florida Statu	tes, the abo	ve-named o	corporation submits this statement for the purpose tration's board of directors. I hereby accept the ap	e or cnanging its r pointment as reg	egistered istered
11. Pursuant of office or r agent. La	to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obligations.	and 607.1508, Florida Statu of Florida. Such change was a ons of, Section 607.0505, Flo	tes, the abo authorized b orida Statute	ve-named only the corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	or changing its reproperties to the pointment as reg	egistered istered
11. Pursuant of office or ragent. La	egistered agent, or both, in the State of im familiar with, and accept the obligati	ons of, Section 607.0505, Flo	authorized b orida Statute	y the corpo es.	ration's board of directors, I hereby accept the ap	pointment as reg	egistered istered
SIGNATURE	egistered agent, or both, in the State or mailiar with, and accept the obligation of the control of the state of the control of the co	ons of, Section 607.0505, Floand title if applicable. (NOTI	authorized b orida Statute E: Registered Aç	y the corpo es.	ration's board of directors. I hereby accept the accept	pointment as reg	istered
office or r 33 agent. I a SIGNATURE	registered agent, or both, in the State or im familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS ANI	ons of, Section 607.0505, Floand title if applicable. (NOTE)	euthorized borida Statute E: Registered Ag 13.	y the corpo	ration's board of directors. I hereby accept the accept	AND DIRECTOR	RS IN 12
agent. I a SIGNATURE	registered agent, or both, in the State of m familiar with, and accept the obligation of the state of the sta	ons of, Section 607.0505, Floand title if applicable. (NOTI	E: Registered Ac	y the corpo	ration's board of directors. I hereby accept the accept	pointment as reg	istered
SIGNATURE 12. TITLE NAME	registered agent, or both, in the State of m familiar with, and accept the obligation of the state of the sta	ons of, Section 607.0505, Floand title if applicable. (NOTE)	E: Registered Ag 1.1 TITLE 1.2 NAME	y the corpo	ration's board of directors. I hereby accept the accept	AND DIRECTOR	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Floand title if applicable. (NOTE)	E: Registered Aç 13. 1.1 TITLE 12 NAME 1.3 STRE	y the corpo	ration's board of directors. I hereby accept the accept	AND DIRECTOR	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of m familiar with, and accept the obligation of the state of the sta	ons of, Section 607.0505, Flo and title if applicable (NOTE DIRECTORS	E: Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY.	ent signature re	ration's board of directors. I hereby accept the accept	AND DIRECTOR	RS IN 12
signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Floand title if applicable. (NOTE)	E: Registered Ac 13. 1.1 TITLE 12 NAME 1.3 STRE 1.4 CITY 2.1 TITLE	ent signature re	ration's board of directors. I hereby accept the accept	AND DIRECTOR	RS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Flo and title if applicable (NOTE DIRECTORS	E: Registered As 13. 1.1 TITLE 12 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME	ent signature re	ration's board of directors. I hereby accept the accept	AND DIRECTOR	RS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Flo and title if applicable (NOTE DIRECTORS	E: Registered Ag 13. 1.1 TITLE 12 NAME 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE	ent signature re	ration's board of directors. I hereby accept the accept	AND DIRECTOR	RS IN 12
office or ragent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Flo and title if applicable (NOTE DIRECTORS	E: Registered As 13. 1.1 TITLE 12 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY	ent signature re E ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	ration's board of directors. I hereby accept the accept	AND DIRECTOR	RS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Fide and title if applicable. (NOTE) D DIRECTORS DELETE	E: Registered Ag 13. 1.1 TITLE 12 NAME 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE	y the corpo	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change	RS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Fide and title if applicable. (NOTE) D DIRECTORS DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAME 1.3 STRE 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME	y the corpo	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change	RS IN 12 Addition Addition
Office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Fide and title if applicable. (NOTE) D DIRECTORS DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE	ent signature re- ter ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change	RS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Fide and title if applicable. (NOTE) D DIRECTORS DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAME 1.3 STRE 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME	y the corpo es. cont signature re ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change	RS IN 12 Addition Addition
office or ragent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the stat	ons of, Section 607.0505, Fide and title if applicable. (NOTE) D DIRECTORS DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 3.4 CITY 3.4 CITY 3.4 CITY 3.5 STRE 3.6 CITY	y the corpo ent signature re ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change	RS IN 12 Addition Addition
Office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME	egistered agent, or both, in the State of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of familiar with accept the	ons of, Section 607.0505, Fide and title if applicable. (NOTE) D DIRECTORS DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.1 TITLE 4.2 NAM	y the corpo ent signature re ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change	RS IN 12 Addition Addition
Office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	egistered agent, or both, in the State of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of familiar with accept the	ons of, Section 607.0505, Fide and title if applicable. (NOTE) D DIRECTORS DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.1 TITLE 4.2 NAM	y the corpo ent signature re ent signatu	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change	RS IN 12 Addition Addition
Office or ragent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of familiar with accept the	ons of, Section 607.0505, Fide and title if applicable. (NOTE) DIRECTORS DELETE DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY. 2.1 TITLE 2.2 NAMI 2.3 STRE 3.1 TITLE 3.2 NAMI 3.3 STRE 4.1 TITLE 4.2 NAMI 4.3 STRE	y the corpo ent signature re ent signatu	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change	RS IN 12 Addition Addition
Office or ragent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of familiar with accept the	ons of, Section 607.0505, Fide and title if applicable. (NOTE) DIRECTORS DELETE DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY. 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 4.3 STRE 4.2 NAM 4.3 STRE 4.4 CITY.	ent signature re- ient signature	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change Change	RS IN 12 Addition Addition Addition
Office or I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State of marillar with, and accept the obligation of the control of the contr	ons of, Section 607.0505, Fide and title if applicable. (NOTE) DIRECTORS DELETE DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 4.3 STRE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME	ent signature re- ient signature	required when reinstating) OATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR Change Change	RS IN 12 Addition Addition Addition
Office or ragent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of the state of familiar with, and accept the obligation of familiar with accept the	ons of, Section 607.0505, Fide and title if applicable. (NOTE) DIRECTORS DELETE DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 4.3 STRE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME	y the corpo ent signature re ent signatu	ration's board of directors. I hereby accept the accept	AND DIRECTOR Change Change	RS IN 12 Addition Addition Addition
Office or agent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of familiar with, and accept the obligation of the control of the contro	ons of, Section 607.0505, Fide and title if applicable. (NOTE) DIRECTORS DELETE DELETE	E: Registered Aç 13. 1.1 TITLE 12 NAMI 1.3 STRE 1.4 CITY. 2.1 TITLE 2.2 NAMI 2.3 STRE 3.1 TITLE 3.2 NAMI 3.3 STRE 4.1 TITLE 4.2 NAMI 4.3 STRE 4.1 TITLE 5.1 TITLE 5.2 NAMI 5.3 STRE 5.3 STRE	y the corpo ent signature re ent signatu	required when reinstating) OATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR Change Change	RS IN 12 Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of familiar with, and accept the obligation of familiar with, and accept the obligation of FICERS AND OFFICERS AND PSD GALKIN, RICHARD M. 654 BOCA MARINA COURT BOCA RATON FL	ons of, Section 607.0505, Fig. and title if applicable. (NOTE) DIRECTORS DELETE DELETE DELETE	E: Registered Aç 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 4.2 NAMI 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY 5.4 CITY 5.5 TITLE 5.4 CITY 5.5 TITLE 5.6 CITY 5.7 TITLE 5.7 TITLE 5.8 TITLE 5.9 TITLE 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY	y the corpo ent signature re ent address ent add	required when reinstating) OATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR Change Change Change	RS IN 12 Addition Addition Addition Addition Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with appears, with all other like empowered.

6.4 CITY-ST-ZIP

FILED

Jan 22, 1999 8:00am

Secretary of State 01-22-1999 90042 006 ***150.00

CR2E034 (11/98)