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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 16 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000014897 (1)

GALAXY REALTY INC.

Mailing Address Principal Place of Business 949 NE 125 ST 949 NE 125 ST NORTH MIAMI FL 33161 NORTH MIAMI FL 33161-5741 3. Date Incorporated or Qualified 3a, Date of Last Report 02/26/1993 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0400505 Not Applicable 21 26 Suite, Ant. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country 7(1) 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 -LIGER, FERDINAND 17240 N.E. 11TH AVE: 82 -N-MIAMI-BEACH FL-83162 83 **B4** 11. Pursuant to the provisions of Sections 607,0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent + am laminar with, and accept the obligations of, Spection 607.0505, Florida Statutes. SABKIN, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) 12 DELETE 1.1 TITLE ___ Change 10116 SABRINA WRIGHT JONES 1.2 NAME CR2E034 NAME 14320 NW 12 AVE STEEL FADORESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP OTY \$1.700 Change Addition DELETE 2.1 TITLE TRUE BRINA WRIGHT JONES **LIGER: FERDINAND** 22 NAME 14320 NW 12AVE 17240 N.E. 11TH AVE. 2.3 STREET ADDRESS STREET ADDRESS MIAMI, FL, 33168 N MIAMI BEACH FL 33162 2. 4 CITY-\$T-ZIP CHY-ST-ZIP DELETE 3.1 TITLE Change Addition 10.6 THADDEUS JONES 3.2 NAME NAME 14320 NW 12 AVE 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY+ST-ZIP CITY-ST Zit DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STHEF ALTORESS 4.4 CITY - ST - ZIP 0/1Y-51-209 ☐ Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAVE 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-2IP CHTY - ST - ZIP DELETE Change Addition 6.1 TITLE $J_{H_{i},f_{i}}$ HAMI 62 NAME 6.3 STREET ADDRESS STREET ADDRESS

64 CITY-ST-ZIR

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 path, 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

14. I do hereby certily 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