FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000048121 (6)

1. Corporation Name
Galaxy Development Group, Inc.

Principal Place of Business	Mailing Address
~~4532 E. Tamiami Trail~~	~~4532 E. Tamiami Trail~~
~~Suite 301~~	~~Suite 301~~
~~Naples Fla. 33962~~	~~Naples Fla. 33962~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 7/09/1993
3a. Date of Last Report:

2. Principal Place of Business	21 24911 Goldcrest Dr.	2a. Mailing Address	26 24911 Goldcrest Dr
Suite, Apt #, etc	22	Suite, Apt #, etc	27
City & State	23 Bonita Springs FL	City & State	28 Bonita Springs FL.
Zip	24 33923	Zip	29 33923
Country	25 US	Country	30 US

4. FEI Number: 65-0422814 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
BLASUCCI Joseph P
4532 E. Tamiami Trail
Suite 301
Naples FL. 33962

10. Name and Address of New Registered Agent
81 Name: Robert Kudelski
82 Street Address (P.O. Box Number is Not Acceptable): 24911 Goldcrest Dr.
83
84 City: Bonita Springs FL 85 Zip Code: 33923

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] Robert Kudelski V/D
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D	1 1 TITLE	☒ Change ☐ Addition
NAME	Parsch James	1 2 NAME	
STREET ADDRESS	4532 E. Tamiami Trail, Suite 301	1 3 STREET ADDRESS	24911 Goldcrest Dr.
CITY ST ZIP	Naples FL. 33962	1 4 CITY ST ZIP	Bonita Springs FL. 33923
TITLE	V/D	2 1 TITLE	☒ Change ☐ Addition
NAME	KUDELSKI Robert	2 2 NAME	
STREET ADDRESS	4532 E. Tamiami Trail, Suite 301	2 3 STREET ADDRESS	24911 Goldcrest Dr.
CITY ST ZIP	Naples FL. 33962	2 4 CITY ST ZIP	Bonita Springs FL. 33923
TITLE	S/T/D	3 1 TITLE	☐ Change ☐ Addition
NAME	Blasucci Joseph P	3 2 NAME	
STREET ADDRESS	4532 E. Tamiami Trail, Suite 301	3 3 STREET ADDRESS	
CITY ST ZIP	Naples Fla. 33962	3 4 CITY ST ZIP	
TITLE		4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	600001472766
STREET ADDRESS		4 3 STREET ADDRESS	-05/03/95--01041--013
CITY ST ZIP		4 4 CITY ST ZIP	****200.00 ****200.00
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY ST ZIP		5 4 CITY ST ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY ST ZIP		6 4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 an address.

SIGNATURE: [signature] Robert Kudelski V/D 4/17/95 (813) 495-7676
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #