


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000002664

1. Entity Name
 GALLWEY GILLMAN CURTIS & VENTO, P.A.



Principal Place of Business 200 S.E. 1ST ST. SUITE 1100 MIAMI, FL 33131	Mailing Address 200 S.E. 1ST ST. SUITE 1100 MIAMI, FL 33131
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DO NOT WRITE IN THIS SPACE



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0546449	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC.
 1201 HAYS ST.
 TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000036957 02/06/04-80079-022 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GALLWEY, WILLIAM J 200 S.E. 1ST ST. MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CURTIS, KAREN 200 S.E. 1ST ST. MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T GILLMAN, STEPHEN 200 S.E. 1ST ST. MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S VENTO, M. THERESE 200 S.E. 1ST ST. MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: M. Therese Vento M. Therese Vento, as Secretary 2/2/04 ⁽³⁰⁵⁾ 358-1313

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #