


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000002664
 1. Entity Name
 GALLWEY GILLMAN CURTIS & VENTO, P.A.



Principal Place of Business 201 S. BISCAYNE BLVD SUITE 1500 MIAMI, FL 33131	Mailing Address 201 S. BISCAYNE BLVD SUITE 1500 MIAMI, FL 33131
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DO NOT WRITE IN THIS SPACE



02072006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0546449	Applied For Not Applicable
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5. Certificate of Status Desired **\$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) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000430088
 02/22/06-80034-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	GALLWEY, WILLIAM J
STREET ADDRESS	200 S.E. 1ST ST.
CITY-ST-ZIP	MIAMI, FL
TITLE	P
NAME	CURTIS, KAREN
STREET ADDRESS	200 S.E. 1ST ST.
CITY-ST-ZIP	MIAMI, FL
TITLE	T
NAME	GILLMAN, STEPHEN
STREET ADDRESS	200 S.E. 1ST ST.
CITY-ST-ZIP	MIAMI, FL
TITLE	S
NAME	VENTO, M. THERESE
STREET ADDRESS	200 S.E. 1ST ST.
CITY-ST-ZIP	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 exemptions contained 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 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 my address with all other like empowered.

SIGNATURE:  **10 Feb. 06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Over Over/Time Phone #