


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 25, 2007 8:00 am**  
**Secretary of State**

06-25-2007 90001 009 \*\*\*150.00

**DOCUMENT # P95000084550**

1. Entity Name  
**GALIL, INC.**



Principal Place of Business      Mailing Address  
**3201 SOUTH OCEAN BLVD**      **3201 SOUTH OCEAN BLVD**  
**#401**      **#401**  
**HIGHLAND BEACH, FL 33487**      **HIGHLAND BEACH, FL 33487**

40121516



2. Principal Place of Business - No P.O. Box #      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

06082007      Chg-P      CR2E034 (12/06)

City & State      City & State

4. FEI Number      Applied For  
**65-0618716**      Not Applicable

Zip      Country      Zip      Country

5. Certificate of Status Desired            **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**AVRAHAMI, GADI**  
**3201 SOUTH OCEAN BLVD**  
**#401**  
**HIGHLAND BEACH, FL 33487**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City      **FL**      Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 14, 2007**

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

**10. OFFICERS AND DIRECTORS**

TITLE	PSD	<input type="checkbox"/> Delete
NAME	AVRAHAMI, GADI	
STREET ADDRESS	3201 SOUTH OCEAN BLVD #401	
CITY - ST - ZIP	HIGHLAND BEACH, FL 33487	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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 an address, with all other like empowered.

SIGNATURE:       **GADI AVRAHAMI**      6/15/07      888-239-5440

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

# ATTACHMENT

• • 40121576  
# P95000084550

Wednesday, May 16, 2007

Dear Sir Madam,

*I am writing you this letter to admit that I was neglectful in paying my annual report on time, the truth is it got berried in a pile of paper work on my desk and I simply did not see it up to now.*

*I will not write any lies or give you some wild story, all I can say is that I will make sure that it would never happen again.*

*I hope you will accept my late payment with my apology.*

*Yours truly,*



*Gadi Avrahami*

*Elite Construction*

*3201 South Ocean Boulevard Suite 401*

*Highland Beach FL. 33487 USA*

*Tel: (561)239-5440*

*Fax: (561) 892-6116*

*E. mail Gavrahami@aol.com*