

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000084550

FILED
Apr 25, 2012
Secretary of State

Entity Name: GALIL, INC.

Current Principal Place of Business:

3201 SOUTH OCEAN BLVD
#401
HIGHLAND BEACH, FL 33487

New Principal Place of Business:

Current Mailing Address:

3201 SOUTH OCEAN BLVD
#401
HIGHLAND BEACH, FL 33487

New Mailing Address:

FEI Number: 65-0618716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PSD
Name: AVRAHAMI, GADI
Address: 3201 SOUTH OCEAN BLVD #401
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: PSD
Name: AVRAHAMI, GADI
Address: 3201 SOUTH OCEAN BLVD UNIT 401
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: PSD
Name: AVRAHAMI, GADI
Address: 3201 SOUTH OCEAN BLVD UNIT 401
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: PSD
Name: GADI, AVRAHAMI
Address: 3201 SOUTH OCEAN BLVD UNIT 401
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: PSD
Name: AVRAHAMI, GADI
Address: 3201 SOUTH OCEAN BLVD UNIT 401
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: PSD
Name: AVRAHAMI, GADI
Address: 3201 SOUTH OCEAN BLVD UNIT 401
City-St-Zip: HIGHLAND BEACH, FL 33487

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GADI AVRAHAMI

PSD

04/25/2012

Electronic Signature of Signing Officer or Director

_____ Date