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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE



FLORIDA DEPARTMENT OF STATE

FILED

Apr 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600007938 (9)

GALLERY ENTERPRISES OF SOUTH FLORIDA, INC.

839 NORTHWEST 132 COURT 839 NORTHWEST 132 COURT MIAMI FL 33182-2250 MIAMI FL 331B2 3. Date Incorporated or Qualified 3a. Date of Last Report 1/25/96 01/25/1996 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business SAME 839 NW 132 CT Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees MIAMI **Trust Fund Contribution** 23 28 Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 25 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD *tumberto* 343 ALMERIA AVENUE 82 **CORAL GABLES FL 33134** 63 84 Miam 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. Humberto Santana are typestor praised name of registered agent and tille if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition PSTD DELETE Change 1.1 TITLE THLE SANTANA, HUMBERTO 1.2 NAME NAM: 839 NORTHWEST 132 COURT 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33182 1.4 CITY-ST-ZIP CITY - ST- ZIF Change Addition DELETE 2.1 TITLE TIBLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-26 Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAM'E 3 3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CHY-ST-ZE Change Addition DELETE 4.1 TITLE TILL 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CICY - ST - ZP DELETE Change ☐ Addition 5.1 TITLE 1000 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY ST 78 Addition Change DELETE 6.1 TITLE THE 6.2 NAME MMS **63 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP CHY-ST-ZiP 14. Los 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 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

bment with an address

Humberdo Santara