

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000016157

**FILED**  
**Aug 22, 2009**  
**Secretary of State**

**Entity Name:** G.A.L. COMMUNICATIONS OF SOUTH FLORIDA INC.

**Current Principal Place of Business:**

18520 NW 67TH AVENUE  
PMB #249  
MIAMI, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

18520 NW 67TH AVENUE  
PMB #249  
MIAMI, FL 33015

**New Mailing Address:**

**FEI Number:** 65-0642133      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAZARUS, GARY A  
14531 CEDAR CT  
MIAMI LAKES, FL 33014      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: GARY A. LAZARUS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VP      ( ) Delete  
Name: LAZARUS, RONALD  
Address: 18520 NW 67TH AVENUE, PMB 249  
City-St-Zip: MIAMI, FL 33015

Title: P      ( ) Delete  
Name: LAZARUS, GARY A  
Address: 18520 NW 67TH AVE., PMB 249  
City-St-Zip: MIAMI, FL 33015

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: LAZARUS, GARY A  
Address: 18520 NW 67TH AVENUE, PMB 249  
City-St-Zip: MIAMI, FL 33015

Title: VP      (X) Change ( ) Addition  
Name: LAZARUS, ROANALD A  
Address: 18520 NW 67TH AVE., PMB 249  
City-St-Zip: MIAMI, FL 33015

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GARY A. LAZARUS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

08/22/2009

\_\_\_\_\_  
Date