

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000016157

**FILED**  
**Jan 19, 2011**  
**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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

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

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

Title: TRES  
Name: MENDOZA-LAZARUS, NILDA MRS  
Address: 18520 N.W. 67TH AVE, PMB 249  
City-St-Zip: MIAMI, FL 33015

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: GARY A. LAZARUS

PRES

01/19/2011

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

\_\_\_\_\_ Date