


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90447 031 ***150.00

DOCUMENT # P97000043872

1. Entity Name
GALAXY AVIATION OF PALM BEACH, INC.



Principal Place of Business Mailing Address
3800 SOUTHERN BLVD **2255 GLADES ROAD STE 321A**
WPB, FL 33406 **BOCA RATON, FL 33431**

00051400

2. Principal Place of Business 3. Mailing Address

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

City & State City & State

Zip Country Zip Country



04102006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For

6. Name and Address of Current Registered Agent

BRESLOW, RICHARD H
2255 GLADES RD STE 321A
BOCA RATON, FL 33431

4. FEI Number Applied For

65-0758138 Not Applicable

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

 \$8.75 Additional Fee Required

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

 \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> Delete
NAME	GREENBERG, MARTIN F	
STREET ADDRESS	22550 GLADES RD STE 321A	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	KOST, BRAD	
STREET ADDRESS	3800 SOUTHERN BLVD	
CITY-ST-ZIP	WEST PALM BEACH, FL 33406	
TITLE	CFOD	<input type="checkbox"/> Delete
NAME	FAREN, MICHAEL	
STREET ADDRESS	22550 GLADES RD STE 321A	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WANTSHOUSE, MARK	
STREET ADDRESS	22550 GLADES RD STE 321A	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	EXVD	<input type="checkbox"/> Delete
NAME	MILLER, JONATHAN P	
STREET ADDRESS	22550 GLADES RD STE 321A	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEOC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREENBERG, MARTIN F.	
STREET ADDRESS	2255 GLADES RD., SUITE 321A	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WANTSHOUSE, MARK	
STREET ADDRESS	2255 GLADES RD., SUITE 321A	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREENBERG, BRETT	
STREET ADDRESS	2255 GLADES RD., SITE 321A	
CITY-ST-ZIP	BOCA RATON, FL 33431	
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: MARTIN F. GREENBERG, CEOC 4-24-06 561-347-8585

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