FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

12261.S.WLJ187THEST



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

12261 S.W. 187TH ST

DOCUMENT # P97000066243

2000

1. Corporation Name

GALEANO & MEJIA, INC.

FILED 00 MAY 19 AM 9:01 SECRETARY OF STATE TALLAHASSEE FLORIDA

Principal Place of Business Mailing Address

> . RT. 33177 MTAMT

ITAMI, EL SSI//		CITACITY ED SOLVY			DO NOT WRITE IN THIS SPACE			Ę	
						3. Date Incorporated or Qualifed O7/31/1997			
. Principal Place of Business		2a. Mailing Address 26				4. FEI Number		Applied For	
						65-0782792		Not Applicable	
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State	<u> </u>	City & State						.00 May Be ded to Fees	
Zip	Country		Zip Co	intry		8. This corporation owes the current year Intangible			
1	25	29	` 30			Personal Property Tax.	☐Yes	s ⊠No	
9. Name and Address of Current Registered Agent				T	10. Name and Address of New Registered Agent				
				81	Name	,			
MEJIA, YOLANDA 12261 S.W. 187TH ST MIAMI, FL 33177				82	Street Address (P.O. Box Number is Not Acceptable)				
			83						
				84	City	F	L 85	Zip Code	
1. Pursuant to th	e provisions of Sections 607.05	02 and 6	07.1508, Florida Statutes, the	bove	-named corp	poration submits this statement for the purpose	of changir	ng 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.

SIGNATURE										
			e required when reinstating) DATE	ᅴ						
12.	OFFICERS AND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ᆚ						
TITLE	PD) □ DELETE	1.1 TITLE	☐ Change ☐ Addition	on						
NAME	MEJIA, Y CLANDA	1.2 NAME								
STREET ADDRESS	12261 S.W. 187IH ST	1.3 STREET ADDRESS	ss	ļ						
CITY-ST-ZIP	MIAMI FL 33177	1.4 CITY-ST-ZIP		_						
TITLE	VD DELETE	2.1 TITLE	r Change Addition	on						
NAME	CALEANO, RUBEN ~	. 2.2 NAME	รถกกกจจจอฮจฮ ก	1						
STREET ADDRESS	12261 S.W. 1871H ST	2.3 STREET ADDRESS	\$ 5000032865250 -06/13/0001027010							
CITY-ST-ZIP	MIAMI FL 33177	2.4 CITY-ST-ZIP	****550.00 ****550.20							
TITLE	DELETE	3.1 TITLE	****550.00 ****50.00 Addition	nc						
NAME		3.2 NAME								
STREET ADDRESS		3.3 STREET ADDRESS	s	ł						
CITY-ST-ZIP		3.4. CITY-ST-ZIP	<u> </u>	_						
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition	on						
NAME		4. 2 NAME								
STREET ADDRESS		4.3 STREET ADDRESS	s .							
CITY-ST-ZIP		4.4 CITY-ST-ZIP		_}						
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition	nc						
NAME		5.2 NAME								
STREET ADDRESS	' '	5.3 STREET ADDRESS	s	ĺ						
CITY-ST-ZIP		5.4 CITY-ST-ZIP								
TITLE	· DELETE	6.1 TITLE	☐ Change ☐ Addition	on						
NAME,		6.2 NAME								
STREET ADDRESS	* * *	6.3 STREET ADDRESS								
CITY-ST-ZIP		6.4 CITY-ST-ZIP	KE.							

14. I 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 appears in Block 12 or Block 13 if changed, on an attachment with an address, with all other like empowered.

SIGNATURE:

05/15/2000

(305) 969-1016