

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000105695

FILED  
Jan 07, 2011  
Secretary of State

**Entity Name:** GALAXY ACQUISITION CORPORATION

**Current Principal Place of Business:**

2255 GLADES ROAD  
SUITE 321A  
BOCA RATON, FL 33431 US

**New Principal Place of Business:**

**Current Mailing Address:**

2255 GLADES ROAD  
SUITE 321A  
BOCA RATON, FL 33431 US

**New Mailing Address:**

**FEI Number:** 65-0758138

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARRA, OLGA E ESQ.  
2255 GLADES ROAD, SUITE 321A  
BOCA RATON, FL 33431 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: C  
Name: GREENBERG, MARTIN F  
Address: 2255 GLADES RD STE 321A  
City-St-Zip: BOCA RATON, FL 33431

Title: CFTD  
Name: FAREN, MICHAEL S  
Address: 2255 GLADES RD STE 321A  
City-St-Zip: BOCA RATON, FL 33431

Title: EXVD  
Name: MILLER, JONATHAN P  
Address: 2255 GLADES RD STE 321A  
City-St-Zip: BOCA RATON, FL 33431

Title: PD  
Name: WANTSHOUSE, MARK  
Address: 2255 GLADES RD SUITE 321A  
City-St-Zip: BOCA RATON, FL 33431

Title: S  
Name: GREENBERG, BRETT  
Address: 2255 GLADES RD., STE 321A  
City-St-Zip: BOCA RATON, FL 33431

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: MARTIN F. GREENBERG

C

01/07/2011

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

\_\_\_\_\_  
Date