2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2004
Secretary of State

DOCUMENT# P98000097815

Entity Name: GALAXY EXPANDS, INC.

Current Principal Place of Business:

7620 NW 186 ST
MIAMI, FL 33015 US

New Principal Place of Business:

7614 NW 186 ST
MIAMI, FL 33015 US

Current Mailing Address:

7620 NW 186 ST
MIAMI, FL 33015

New Mailing Address:

7614 NW 186 ST
MIAMI, FL 33015

FEI Number: 65-0877036 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MELLACHERUVU, HARITHA
730 SW 190 AVENUE
PEMBROKE PINES, FL 33029 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MELLACHERUVU, HARITHA
Address: 730 SW 190 AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VSTD ( ) Delete
Name: CHITEPU, ARUNA R
Address: 19010 SW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ARUNA R. CHITEPU VSTD 04/25/2004

Electronic Signature of Signing Officer or Director Date