2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 24, 2008 08:00 AM Secretary of State

ANNOAL REPORT				Secretary of Sta			
DOCUMEN 1. Entity Name GALERIA D'OR,					~	,	- /
			Contract of the contract of th	_			
Principal Place of Busin 531 LINCOLN RD	ess ess	Mailing Address 531 LINCOLN RD		•			
MIAMI BEACH, FL 331	139	MIAMI BEACH, FL 33139					
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4 . 4 . 44.7 . 5					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		KI 11 IMMI
DO N	OT WRITE	IN THIS SPA	CE S	01172008	No Chg-P	CR2E034 (11/05)	
DO: I	OI WINTE			4. FEI Numbe 65-030			ed For Applicable
			The said	5. Certificate	of Status Desired	S8.75 Addition	onal
6. Na	me and Address of Current R	egistered Agent	- (1) (1) (1) (1) (1) (1)		in the second		
STEIN, LUIS 531 LINCOLN RD			The second secon	DO	NOT W	RITE	
MIAMI BEACH, FL				IN T	THIS SF	PACE	
		the purpose of changing its registe	ared office or register	red agent, or bot	th, in the State of Flo	orida. I am familiar with, ar	nd accept
the obligations of reg	gistered agent.						
SIGNATURESignature, ty	ped or printed name of registered agent an	d title il applicable (NOTF Registe	ired Agent signature require	d when re-instating)		DATE	
	!!! FEE IS \$150.00 108 Fee will be \$550.0	S. Election Campaign Fin Trust Fund Contribution	ancing \$5 n.	.00 May Be led to Fees			
10.	OFFICERS AND D	RECTORS		. , ,			<u></u>
NAME STEIN,							
1	NCOLN RD BEACH, FL						
TITLE						ງິບໄຊ້້ອີ້ຣີຂໍ້ໄອ	٠.
NAME STREET ADDRESS					,, ,'01/28/U	3-80042-007 15	50.00
Citr-ST-ZiP TitlE							
NAME			*, **	3, 43 +4			
STREET ADDRESS CITY ST-ZIP			1	DO	NOT W	RITE	,
TITLE				IN	THIS SI	PACE	
STREET ADDRESS							
CITY-ST-ZIP							
NAME STREFT ADDRESS							
CITY ST-ZIP							
TITLE					nki isa. Tak		
CIDEL ADDRESS			4.3	马克萨帕特人 多克亚	Cartery Company		S

12. Thereby 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.

18/08

CITY-ST-ZIP