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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V43262

(7)

**GALA ENVIRONMENTAL CORP.** 

## FILED Apr 17 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address						
4345 W KENNEDY BLVD TAMPA FL 33609		4345 W. KENNEDY BLVD. TAMPA FL 33609				DO NOT WRITE IN TH	IS SPACE	
U\$		U\$				3. Date Incorporated or Qualified	0 01 1102	
			<u> </u>			06/12/1992		
_	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-3144969	<del></del>	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	e 	City & State				Election Campaign Financing     Trust Fund Contribution		O May Be d to Fees
Zip	Country 25	Ζφ <b>29</b>	Country 30			This corporation owes or has paid the Personal Property Tax due June 30.		ntangible
	g. Name and Address of Curre			81 N		10. Name and Address of New Registers	Agent	
ARI	ARENAS, GUSTAVO L				Vame			
. 8728 IMPERIAL COURT TAMPA FL 33635			1	<b>82</b> S	itreet Addr	ress (P.O. Box Number is Not Acceptable)		
100	III A I L 99999		1	83				
			<b> </b>	84 C	City		. 85 Zip	Code
						<b>_F</b>	<u>L                                     </u>	
office or re agent. I as	to the provisions of Sections 607.05 registered agent, or both, in the Stat im familiar with, and accept the obli-	ite of Florida. Such change was	s authorized.	by the	amed corp e corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing ippointment a	its registered is registered
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable (NC	OTE Registered	Agen! si	ignature requir	ired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	P	☐ DELETE	1.1 TITL				☐ Change	Addition
NAME	ARENAS, GUSTAVO L			1.2 NAME				
STREET ADDRESS	, 0,00 0.00		1.3 STREET ADDRESS					
CITY-ST-ZIP	TAMPA FL V	DELETE		1.4 CITY-ST-ZIP 2.1 TITLE			Change	Addition
NAME	ARENAS, LOURDES L	☐ bett.t.	2.1 IIE 2.2 NAM				L ⊓ onengo	L J Addition
STREET ADDRESS	8728 IMPERIAL COURT		2.3 STREET		VDEGG			
CITY-ST-ZIP	TAMPA FL			2. 4 CITY-ST-ZIP				
TITLE	3740000			LE			Change	Addition
NAME			3.2 NAM	ME				
STREET ADDRESS			3.3 STR	REET ADD	ORESS			
CITY-ST-ZIP			3.4. CIT	Y-ST-2	iP			
TITLE	1			4.1 TITLE			Change	Addition
NAME			B B	4. 2 NAME 4.3 STREET ADDRESS				
STREET ADDRESS	I							
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY 5.1 TITU	Y - ST - ZI	IP		Change	Addition
NAME			5.2 NAM					Nuomon
STREET ADDRESS			- 1	REET ADD	ORESS			
CITY-ST-ZIP				Y-\$1-Zi	[	÷		
TITLE		☐ DELETE	6 1 TITU		-		Change	Addition
NAME			6.2 NAM	МE				
STREET ADDRESS			6.3 STR	REET ADD	DRESS			

14. Thereby 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 or on an attachment with an address.

6.4 CITY-ST-ZIP