

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006033

Entity Name: R.M. GALICIA, INC.

FILED  
Jan 24, 2008  
Secretary of State

## Current Principal Place of Business:

1521 WEST CAMERON AVE., FIRST FLOOR  
WEST COVINA, FL 91790

## New Principal Place of Business:

## Current Mailing Address:

1521 WEST CAMERON AVE., FIRST FLOOR  
WEST COVINA, FL 91790

## New Mailing Address:

FEI Number: 95-3901427

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CEOB ( ) Delete  
Name: GALICIA, RODOLFO  
Address: 3122 DOLONITA  
City-St-Zip: HACIENDA HEIGHTS, CA 91745

Title: PD ( ) Delete  
Name: BANTA, TIMOTHY  
Address: 7 MEADOW RIDGE ROAD  
City-St-Zip: PHILLIPS RANCH, CA 91766

Title: SD ( ) Delete  
Name: GUTIERREZ, WILLIAM  
Address: 2895 TEAL ST.  
City-St-Zip: LA VERNE, CA 91750

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOB (X) Change ( ) Addition  
Name: GALICIA, RODOLFO  
Address: 36351 BUTTERFLY PEAK  
City-St-Zip: MOUNTAIN CENTER, CA 92561

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 exemption stated 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 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: TIMOTHY BANTA

PRES

01/24/2008

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

\_\_\_\_\_ Date