

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 649258

**Entity Name:** HALGLENN CORP.

**Current Principal Place of Business:**

4400 BISCAYNE BLVD  
SUITE 950  
MIAMI, FL 33137

**Current Mailing Address:**

4400 BISCAYNE BLVD  
SUITE 950  
MIAMI, FL 33137

**FEI Number:** 59-1957314

**Certificate of Status Desired:** No

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

HALPRYN, GLENN L  
4400 BISCAYNE BOULEVARD  
SUITE 950  
MIAMI, FL 33137 US

*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:** GLENN L. HALPRYN

02/11/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP, ASST. SECRETARY  
Name HALPRYN-LEVIN, ALISON  
Address 4400 BISCAYNE BOULEVARD SUITE  
950  
City-State-Zip: MIAMI FL 33137

Title PRESIDENT, TREASURER  
Name HALPRYN, GLENN L  
Address 4400 BISCAYNE BLVD SUITE 950  
City-State-Zip: MIAMI FL 33137

Title SECRETARY  
Name CABRERA, MARLENE  
Address 4400 BISCAYNE BLVD, SUITE 950  
City-State-Zip: MIAMI FL 33137

*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:** GLENN L. HALPRYN

**PRESIDENT**

02/11/2020

Electronic Signature of Signing Officer/Director Detail

Date