

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K69797

**FILED**  
**Apr 22, 2015**  
**Secretary of State**  
**CC3367510091**

**Entity Name:** SAGLO DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

777 BRICKELL AVE, SUITE 708  
MIAMI, FL 33131

**Current Mailing Address:**

777 BRICKELL AVE, SUITE 708  
MIAMI, FL 33131 US

**FEI Number:** 65-0110333

**Certificate of Status Desired:** No

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

GLOTTMANN, JACK  
777 BRICKELL AVE, SUITE 708  
MIAMI, FL 33131 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DPS  
Name           GLOTTMANN, JACK  
Address        777 BRICKELL AVE, SUITE 708  
City-State-Zip: MIAMI FL 33131

Title           DV  
Name           GLOTTMANN, DALIA  
Address        777 BRICKELL AVE, SUITE 708  
City-State-Zip: MIAMI FL 33131

Title           D  
Name           GLOTTMANN, DEBORAH  
Address        777 BRICKELL AVE, SUITE 708  
City-State-Zip: MIAMI FL 33131

Title           D  
Name           GLOTTMANN, LINDA  
Address        777 BRICKELL AVE, SUITE 708  
City-State-Zip: MIAMI FL 33131

*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:** JACK GLOTTMANN

**DPS**

**04/22/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date