

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000011221

**Entity Name:** ESOGALMI CORP

**Current Principal Place of Business:**

275 NE 18TH ST  
310  
MIAMI, FL 33132

**Current Mailing Address:**

275 NE 18TH ST  
310  
MIAMI, FL 33132

**FEI Number:** 27-4732490

**Certificate of Status Desired:** No

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

BRIAN PRZYSTUP & ASSOCIATES LLC  
275 NE 18TH ST  
310  
MIAMI, FL 33132 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 PD  
Name ALATRISTE, GABRIELA  
Address 275 NE 18TH ST SUITE 310  
City-State-Zip: MIAMI FL 33132

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:** ALATRISTE, GABRIELA

PD

01/29/2016

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

\_\_\_\_\_  
Date