

2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P13000036677

Entity Name: U-GLOVE, INC.**Current Principal Place of Business:**2200 N. COMMERCE PKWY - STE. 200
WESTON, FL 33326**Current Mailing Address:**2200 N. COMMERCE PKWY - STE. 200
WESTON, FL 33326 US**FEI Number: 38-3904413****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LYON, ANTONIO
2200 N. COMMERCE PKWY - STE. 200
WESTON, FL 33326 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 DIRECTOR, PRESIDENT
Name LYON, ANTONIO
Address 2900 NW 125TH AVE. #415
City-State-Zip: SUNRISE FL 33323

Title DIRECTOR
Name GIORDANO, JOSEFINA C
Address 4775 NW 110 CT
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name GIORDANO, JHONNIE
Address 10860 NW 52ND ST
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name APONTE, JOSE
Address 2200 N. COMMERCE PKWY - STE. 200
City-State-Zip: WESTON FL 33326

Title DIRECTOR
Name GONZALEZ, CARLOS M
Address 2200 N. COMMERCE PKWY - STE. 200
City-State-Zip: WESTON FL 33326

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: ANTONIO LYON**PRESIDENT****04/25/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date