

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000075376

**Entity Name:** GLAMOXIE MEDICAL, INC

**Current Principal Place of Business:**

12920 SW 122 AVE  
MIAMI, FL 33186

**Current Mailing Address:**

12920 SW 122 AVE  
MIAMI, FL 33186 US

**FEI Number: 84-3307536**

**Certificate of Status Desired: No**

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

RODRIGUEZ, YULEIDY  
17121 SW 156 CT  
MIAMI, FL 33187 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            P  
Name            RODRIGUEZ, YULEIDY  
Address        17121 SW 156 CT  
City-State-Zip: MIAMI FL 33187

*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: YULEIDY RODRIGUEZ**

P

**03/29/2023**

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

\_\_\_\_\_  
Date