

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000075067

**Entity Name:** EGS MANAGEMENT, INC.

**Current Principal Place of Business:**

1000 BRICKELL AVENUE, SUITE 715  
SUITE 715, #1145  
MIAMI, FL 33131

**Current Mailing Address:**

1000 BRICKELL AVENUE, SUITE 715  
#1145  
MIAMI, FL 33131 UN

**FEI Number:** 83-1326025

**Certificate of Status Desired:** No

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

NELSON, KRISTY D  
1000 BRICKELL AVENUE, SUITE 715  
#1145  
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           VP  
Name           NELSON, KRISTY  
Address        1000 BRICKELL AVENUE, SUITE 715  
City-State-Zip: MIAMI FL 33131

Title           VP  
Name           NELSON, KRISTY  
Address        7750 NW 25TH STREET  
City-State-Zip: MIAMI FL 33122

Title           MAN  
Name           NELSON, KRISTY  
Address        1000 BRICKELL AVENUE, SUITE 715  
City-State-Zip: MIAMI FL 33131

Title           OPM  
Name           DEVI, KRISTY  
Address        1000 BRICKELL AVENUE, SUITE 715  
City-State-Zip: MIAMI FL 33131

Title           SRC  
Name           DEVI, KRISTY  
Address        1000 BRICKELL AVENUE, SUITE 715  
City-State-Zip: MIAMI FL 33131

Title           CON  
Name           DEVI, KRISTY  
Address        7750 NW 25TH STREET  
City-State-Zip: MIAMI FL 33122

*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:** KRISTY DEVI

**PRESIDENT**

**04/30/2023**

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

\_\_\_\_\_  
Date