

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000004422

**Entity Name:** EALG INTERIM SOLUTION, INC.

**FILED**  
**Feb 25, 2023**  
**Secretary of State**  
**4351334579CC**

**Current Principal Place of Business:**

1221 BRICKELL AVENUE  
SUITE 2660  
MIAMI, FL 33131

**Current Mailing Address:**

1221 BRICKELL AVENUE  
SUITE 2660  
MIAMI, FL 33131 US

**FEI Number:** 80-0964453

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            PRESIDENT  
Name            TOLZIEN, JAMES R.  
Address        1221 BRICKELL AVENUE  
                  SUITE 2660  
City-State-Zip: MIAMI FL 33131

Title            DIRECTOR  
Name            NIETHARDT, DAVID  
Address        1221 BRICKELL AVENUE  
                  SUITE 2660  
City-State-Zip: MIAMI FL 33131

Title            DIRECTOR  
Name            VIOLA, MICHAEL  
Address        1221 BRICKELL AVENUE  
                  SUITE 2660  
City-State-Zip: MIAMI FL 33131

Title            DIRECTOR  
Name            CIFU, DOUG  
Address        1221 BRICKELL AVENUE  
                  SUITE 2660  
City-State-Zip: MIAMI FL 33131

Title            CFO  
Name            TOLZIEN, JAMES R.  
Address        1221 BRICKELL AVENUE  
                  SUITE 2660  
City-State-Zip: MIAMI FL 33131

Title            SECRETARY  
Name            TOLZIEN, JAMES R.  
Address        1221 BRICKELL AVENUE  
                  SUITE 2660  
City-State-Zip: MIAMI FL 33131

Title            TREASURER  
Name            LOUDON, NICHOLAS  
Address        460 NE 28 ST  
                  APT. 808  
City-State-Zip: MIAMI FL 33137

*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:** JAMES R. TOLZIEN

**PRESIDENT**

**02/25/2023**

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

\_\_\_\_\_  
Date