## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P09000090939

Entity Name: MG THERAPY, INC.

### **Current Principal Place of Business:**

1500 WESTON ROAD SUITE 215 WESTON, FL 33326

### **Current Mailing Address:**

**304 INDIAN TRACE** SUITE #324 WESTON, FL 33326 US

### FEI Number: 27-1251443

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

**E & F LATIN ACCOUNTING LLC** 1820 N CORPORATE LAKES BLVD WESTON, FL 33331 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: DIEGO FIGUEROA

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title D **GURFINKEL, MARIA E** Name 16123 OPAL CREEK DR Address

City-State-Zip: WESTON FL 33331

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: MARIA EUGENIA GURFINKEL

DIRECTOR

01/15/2020

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Jan 15, 2020 Secretary of State 0127530148CC

Certificate of Status Desired: No

01/15/2020

Date