

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000090939

Entity Name: MG THERAPY, INC.

Current Principal Place of Business:

304 INDIAN TRACE
SUITE #324
WESTON, FL 33326

Current Mailing Address:

304 INDIAN TRACE
SUITE #324
WESTON, FL 33326

FEI Number: 27-1251443

Certificate of Status Desired: No

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

01/25/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

OWNER

01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date