

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000033207

**Entity Name:** GALLO TERAPIA, INC.

**Current Principal Place of Business:**

6057 PETUNIA ROAD  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

6057 PETUNIA ROAD  
DELRAY BEACH, FL 33484 US

**FEI Number: 86-3304578**

**Certificate of Status Desired: No**

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

STEPHEN R. GLADSTONE, P.A.  
7000 WEST PALMETTO PARK ROAD  
SUITE 210  
BOCA RATON, FL 33433 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            PRES  
Name            GALLO, MARIA  
Address        6057 PETUNIA ROAD  
City-State-Zip: DELRAY BEACH FL 33484

*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 GALLO**

**PRESIDENT**

**01/23/2023**

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

\_\_\_\_\_  
Date