

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000036811

**Entity Name:** VGM HEALTHY STYLE INC

**Current Principal Place of Business:**

411 NW 23RD ST  
CAPE CORAL, FL 33993

**Current Mailing Address:**

411 NW 23RD ST  
CAPE CORAL, FL 33993 US

**FEI Number:** 93-1395867

**Certificate of Status Desired:** No

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

VILLEGAS DE GALOFRE, MILAGROS C  
411 NW 23RD ST  
CAPE CORAL, FL 33993 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 P  
Name VILLEGAS DE GALOFRE, MILAGROS C  
Address 411 NW 23RD ST  
City-State-Zip: CAPE CORAL FL 33993

Title VP  
Name GALOFRE ESTUPINIAN, PABLO J  
Address 411 NW 23RD ST  
City-State-Zip: CAPE CORAL FL 33993

Title S  
Name GALOFRE VILLEGAS, ANGELO MOISES  
Address 411 NW 23RD ST  
City-State-Zip: CAPE CORAL FL 33993

*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:** VILLEGAS DE GALOFRE, MILAGROS C

P

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date