

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000042878

**Entity Name:** GALLOS MEDICAL SERVICES CORP

**Current Principal Place of Business:**

80 NW 22ND AVE  
MIAMI, FL 33125

**Current Mailing Address:**

7801 SW 132ND ST  
MIAMI, FL 33156 US

**FEI Number:** 93-1845922

**Certificate of Status Desired:** No

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

LINARES PEREZ, ARMANDO N  
80 NW 22ND AVE  
MIAMI, FL 33125 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 LINARES PEREZ, ARMANDO N  
Address 80 NW 22ND AVE  
City-State-Zip: MIAMI FL 33125

Title VP  
Name GONZALEZ REINA, ELIESER  
Address 80 NW 22ND AVE  
City-State-Zip: MIAMI FL 33125

Title VP  
Name HERNANDEZ ROSADO, LUIS  
Address 80 NW 22ND AVE  
City-State-Zip: MIAMI FL 33125

*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:** ARMANDO NOE LINARES PEREZ

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date