

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S56774

Entity Name: GLY, INC.

**Current Principal Place of Business:**

230 W. SAN MARINO DRIVE  
MIAMI BEACH, FL 33139-1149

**Current Mailing Address:**

230 W. SAN MARINO DRIVE  
MIAMI BEACH, FL 33139-1149

FEI Number: 65-0261415

Certificate of Status Desired: No

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

MEDERO, MIRIAM  
230 WL SAN MARINO DR.  
MIAMI BEACH, FL 33139-1149 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 MEDERO, LUIS R  
Address 230 W. SAN MARINO DR.  
City-State-Zip: MIAMI BEACH FL 33139

Title D  
Name MEDERO, MIRIAM M  
Address 230 W. SAN MARINO DR.  
City-State-Zip: MIAMI BEACH FL 33139

Title D  
Name MEDERO, LUIS  
Address 704 NW 37 AVE  
City-State-Zip: CAPE CORAL FL 33993

Title D  
Name MEDERO SIERRA, GLADYS  
Address 14306 SW 164 TERR  
City-State-Zip: MIAMI FL 33177

Title D  
Name CASTILLO, YESENIA  
Address 3401 SW 130 AVE  
City-State-Zip: MIRAMAR FL 33027

Title D  
Name MEDERO, JANET  
Address 13322 SW 6 ST  
City-State-Zip: MIAMI FL 33184

*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: MIRIAM MEDERO

DIRECTOT

02/22/2016

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

\_\_\_\_\_ Date