

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000257326

**Entity Name:** GALCO SERVICES USA LLC

**Current Principal Place of Business:**

4737 NW 103RD AVE  
BAY 7  
SUNRISE, FL 33351

**Current Mailing Address:**

4737 NW 103RD AVE  
BAY 7  
SUNRISE, FL 33351 US

**FEI Number:** 35-2645756

**Certificate of Status Desired:** No

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

COHEN, GAL  
4737 NW 103RD AVE  
BAY 7  
SUNRISE, FL 33351 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

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           COHEN, GAIL  
Address        4737 NW 103RD AVE  
                  BAY 7  
City-State-Zip: SUNRISE FL 33351

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GAIL COHEN

**OWNER**

**03/06/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date