

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K24134

**Entity Name:** OPTI-MEDICAL EQUIPMENT & SUPPLIES, INC.

**Current Principal Place of Business:**

11951 SW 124 TER  
MIAMI, FL 33186

**Current Mailing Address:**

11951 SW 124TH TER  
MIAMI, FL 33186 US

**FEI Number: 65-0054901**

**Certificate of Status Desired: No**

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

ARGUELLO, JORGE  
11951 SW 124TH TER  
MIAMI, FL 33186 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            DIRECTOR  
Name            ARGUELLO, JORGE  
Address        11951 SW 124 TERR  
City-State-Zip: MIAMI FL 33186

Title            DIRECTOR  
Name            ARGUELLO, LORENA M  
Address        11951 SW 124 TER  
City-State-Zip: MIAMI FL 33186

*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: LORENA M ARGUELLO**

**MGR**

**02/08/2023**

Electronic Signature of Signing Officer/Director Detail

Date