

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000048242

Entity Name: TRIPLE O MEDICAL SERVICES, P.A.**Current Principal Place of Business:**2580 METROCENTRE BOULEVARD
SUITE 3
WEST PALM BEACH, FL 33407**Current Mailing Address:**2580 METROCENTRE BOULEVARD
SUITE 3
WEST PALM BEACH, FL 33407 US**FEI Number:** 65-1015825**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:** ASHLEY ISBERT, ASSISTANT VICE PRESIDENT

03/09/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P/S/T
Name	OSIYEMI, OLAYEMI
Address	2580 METROCENTER BOULEVARD SUITE 3
City-State-Zip:	WEST PALM BEACH FL 33407

Title	VP
Name	MENAJOVSKY, JOSE
Address	183 ISLE VERDE WAY
City-State-Zip:	PALM BEACH GARDENS FL 33418

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: OLAYEMI OSIYEMI

MANAGER

03/09/2022

Electronic Signature of Signing Officer/Director Detail

Date