

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000045120

**FILED
Apr 15, 2019
Secretary of State
1622133790CC**

Entity Name: TRIAXIAL MEDICAL INCORPORATED

Current Principal Place of Business:

900 EAST OCEAN BLVD.
SUITE D-130
STUART, FL 34994-3501

Current Mailing Address:

900 EAST OCEAN BLVD.
SUITE D-130
STUART, FL 34994-3501 US

FEI Number: 34-1984984

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COOK, GEOFFREY A
504 SW SOUTH CAROLINA DRIVE
STUART, FL 34994 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 | PRES | Title | CEO |
| Name | COOK, GEOFFREY A | Name | COOK, JAN |
| Address | 504 SW SOUTH CAROLINA DRIVE | Address | 900 EAST OCEAN BLVD. SUITE D-130 |
| City-State-Zip: | STUART FL 34994 | City-State-Zip: | STUART FL 34994-3501 |

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: GEOFFREY A COOK

PRESIDENT

04/15/2019

Electronic Signature of Signing Officer/Director Detail

Date