

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000035579

**Entity Name:** PYRAMID HEALTHCARE HOLDINGS INC.

**Current Principal Place of Business:**

2500 WESTCHESTER AVENUE  
SUITE 300  
PURCHASE, NY 10577

**Current Mailing Address:**

2500 WESTCHESTER AVENUE  
SUITE 300  
PURCHASE, NY 10577 US

**FEI Number:** 27-2425865

**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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            DIRECTOR, PRESIDENT, CEO  
Name            WALSH, SIMON  
Address        2500 WESTCHESTER AVENUE  
                  SUITE 300  
City-State-Zip: PURCHASE NY 10577

Title            CFO, DIRECTOR, TREASURER  
Name            MAROO, JAYESH  
Address        2500 WESTCHESTER AVENUE  
                  SUITE 300  
City-State-Zip: PURCHASE NY 10577

*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:** SIMON WALSH

**CHIEF EXECUTIVE  
OFFICER**

**04/08/2019**

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

\_\_\_\_\_ Date