

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000035579

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

**Current Principal Place of Business:**

5920 WINDHAVEN PKWY  
SUITE 110  
PLANO, TX 75093

**Current Mailing Address:**

5920 WINDHAVEN PKWY  
SUITE 110  
PLANO, TX 75093 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 SECRETARY  
Name HALL , THOMAS  
Address 4705 DUKE DRIVE  
City-State-Zip: MASON OH 45040

Title CFO  
Name BRIAN , GILMARTIN  
Address 5920 WINDHAVEN PKWY  
SUITE 110  
City-State-Zip: PLANO TX 75093

Title CEO, DIRECTOR, PRESIDENT  
Name KHANNA, RAKESH  
Address 5920 WINDHAVEN PKWY  
SUITE 110  
City-State-Zip: PLANO TX 75093

*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:** THOMAS HALL

SECRETARY

04/21/2024

Electronic Signature of Signing Officer/Director Detail

Date