

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000046815

**Entity Name:** TRIFLEXA CORPORATION

**Current Principal Place of Business:**

101 BRINY AVE  
2002T  
POMPANO, FL 33062

**Current Mailing Address:**

101 BRINY AVE  
2002T  
POMPANO, FL 33062 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GOLDMAN, ROBERT E ESQ  
1 EAST BROWARD BLVD  
700  
FORT LAUDERDALE, FL 33301 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            D  
Name            HALWAIJ, ABRAHM  
Address        101 BRINY AVE  
City-State-Zip: POMPANO FL 33062

*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:** HALWAIJ , ABRAHM

**DIR**

**04/30/2024**

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

\_\_\_\_\_  
Date