

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000054824

**Entity Name:** ONE STOP HEALTH INC.

**Current Principal Place of Business:**

2760 FOXHALL DR E  
WEST PALM BEACH, FL 33417

**Current Mailing Address:**

2760 FOXHALL DR E  
WEST PALM BEACH, FL 33417 US

**FEI Number:** 85-1996820

**Certificate of Status Desired:** No

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

ALEXANDER, DEREK  
5541 N UNIVERSITY DR  
STE 103  
CORAL SPRINGS, FL 33067 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 P  
Name HAVRILESKO, COLE  
Address 2884 TENNIS CLUB DR APT 604  
City-State-Zip: WEST PALM BEACH FL 33417

*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:** COLE HAVRILESKO

**PRESIDENT**

**03/07/2023**

Electronic Signature of Signing Officer/Director Detail

Date