

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000017403

Entity Name: NOVOMEDICAL, INC.

Current Principal Place of Business:

17285 RAINSTREAM RD.
BOCA RATON, FL 33496

Current Mailing Address:

17285 RAINSTREAM RD.
BOCA RATON, FL 33496 US

FEI Number: 32-0681656

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOVODVORETS, MARIANA
17285 RAINSTREAM RD.
BOCA RATON, FL 33496 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 NOVODVORETS, MARIANA
Address 17285 RAINSTREAM RD.
City-State-Zip: BOCA RATON FL 33496

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: MARIANA NOVODVORETS

PRESIDENT

03/29/2024

Electronic Signature of Signing Officer/Director Detail

Date