

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000071017

**Entity Name:** VERTICAL SPECIALIST, INC.

**Current Principal Place of Business:**

9531 FOUNTAINBLEAU BLVD  
#609  
MIAMI, FL 33172

**Current Mailing Address:**

9531 FOUNTAINBLEAU BLVD  
#609  
MIAMI, FL 33172

**FEI Number:** 65-0444080

**Certificate of Status Desired:** No

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

MEDINA, DAVID  
9531 FOUNTAINBLEAU BLVD., #609  
MIAMI, FL 33172 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	PD	Title	VP
Name	MEDINA, DAVID	Name	MEDINA, DANIEL
Address	9531 FOUNTAINBLEAU BLVD #609	Address	15175 SW 212 ST
City-State-Zip:	MIAMI FL 33172	City-State-Zip:	MIAMI FL 33187

*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:** DAVID MEDINA

PD

01/30/2024

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

\_\_\_\_\_  
Date