

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000001474

**Entity Name:** TRXADE HEALTH, INC.

**Current Principal Place of Business:**

2420 BRUNELLO TRACE  
LUTZ, FL 33558

**Current Mailing Address:**

P.O. BOX 1186  
LAND O'LAKES, FL 34639 US

**FEI Number:** 46-3673928

**Certificate of Status Desired:** No

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

AJJARAPU, SURENDRA  
2420 BRUNELLO TRACE  
LUTZ, FL 33558 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:** SURENDRA AJJARAPU

02/10/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            CEO  
Name            AJJARAPU, SURENDRA  
Address        2420 BRUNELLO TRACE  
City-State-Zip: LUTZ FL 33558

Title            COO  
Name            PATEL, PRASHANT  
Address        2420 BRUNELLO TRACE  
City-State-Zip: LUTZ FL 33558

Title            BOARD OF DIRECTORS  
Name            FELL, DONALD  
Address        2420 BRUNELLO TRACE  
City-State-Zip: LUTZ FL 33558

Title            BOARD OF DIRECTORS  
Name            CHRISTINE, JENNINGS  
Address        2420 BRUNELLO TRACE  
City-State-Zip: LUTZ FL 33558

Title            BOARD OF DIRECTORS  
Name            POPE, CHARLES  
Address        2420 BRUNELLO TRACE  
City-State-Zip: LUTZ FL 33558

*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:** SURENDRA AJJARAPU

CEO

02/10/2022

Electronic Signature of Signing Officer/Director Detail

Date