

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000001564

**Entity Name:** MEDIFIT CORPORATE SERVICES, INC.**Current Principal Place of Business:**2629 E. ROSE GARDEN LAND  
PHOENIX, AZ 85050**Current Mailing Address:**2629 E. ROSE GARDEN LANE  
PHOENIX, AZ 85050 US**FEI Number:** 22-3339492**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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	PRE
Name	VERSTEGEN, MARK
Address	2629 E ROSE GARDEN LN
City-State-Zip:	PHOENIX AZ 85050

Title	CHAIRMAN
Name	BURNS, DAN
Address	2629 E ROSE GARDEN LN
City-State-Zip:	PHOENIX AZ 85050

Title	COO
Name	BOURQUE, BILL
Address	2629 E ROSE GARDEN LN
City-State-Zip:	PHOENIX AZ 85050

Title	AS
Name	SOFFER, CARA
Address	2629 E ROSE GARDEN LN
City-State-Zip:	PHOENIX AZ 85050

Title	CFO, SECRETARY, TREASURER
Name	VIGFUSSON, TREVOR
Address	2626 E. ROSE GARDEN LANE
City-State-Zip:	PHOENIX AZ 85050

Title	DIRECTOR
Name	O'HAGAN, SARAH ROBB
Address	2629 E. ROSE GARDEN LAND
City-State-Zip:	PHOENIX AZ 85050

*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:** CARA SOFFER**ASSISTANT SECRETARY** 04/26/2023\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date