

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000003589

**Entity Name:** OPHELIA HEALTH, INC.**Current Principal Place of Business:**228 PARK AVE S STE 15314  
NEW YORK, NY 10003**Current Mailing Address:**228 PARK AVE S STE 15314  
NEW YORK, NY 10003 US**FEI Number:** 84-2629270**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	DRPR
Name	SPENCER GRAY, ZACHARY
Address	228 PARK AVE S STE 15314
City-State-Zip:	NEW YORK NY 10003

Title	DST
Name	KLUGE GRIFFEL, MATTAN
Address	228 PARK AVE S STE 15314
City-State-Zip:	NEW YORK NY 10003

Title	DIR
Name	YAP, GREG
Address	228 PARK AVE S STE 15314
City-State-Zip:	NEW YORK NY 10003

*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:** MATTAN KLUGE GRIFFEL

DST

03/31/2023

Electronic Signature of Signing Officer/Director Detail

Date