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: TATIANA DAVILA NUNEZ

Electronic Signature of Signing Officer/Director Detail

Current Principal Place of Business: 375 WEST 22ND ST

MIAMI, FL 33184

Current Mailing Address:

2021 SW 134TH AVE MIAMI. FL 33175 US

FEI Number: 87-1162825

Name and Address of Current Registered Agent:

VALDES ESPINOSA, MIRELYS 2021 SW 134 AVE MIAMI, FL 33175 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

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Officer/Director Detail :

Title	PRESIDENT, SECRETARY	Title	VP
Name	DAVILA NUNEZ, TATIANA	Name	VALDES ESPINOSA, MIRELYS
Address	2021 SW 134 AVE	Address	12610 SW 72 TERR
City-State-Zip:	MIAMI FL 33175	City-State-Zip:	MIAMI FL 33183

DOCUMENT# P21000055090 Entity Name: DAVILA MEDICAL GROUP INC

FILED Jul 30, 2024 Secretary of State 9509096798CC

Certificate of Status Desired: No

PRESIDENT

07/30/2024

Date

Date