

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000085122

**Entity Name:** TRIDENT MEDICAL GROUP, PA

**Current Principal Place of Business:**

382 NE 191ST STREET  
MIAMI, FL 33179

**Current Mailing Address:**

382 NE 191ST STREET  
PMB 75481  
MIAMI, FL 33179-3899 US

**FEI Number: 87-2888744**

**Certificate of Status Desired:** Yes

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 CEO, CFO, S  
Name HENDERSON, KIMBERLY MD  
Address 333 SE 2ND ST  
SUITE 2000  
City-State-Zip: MIAMI FL 33131

*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: KIMBERLY HENDERSON, M.D.**

**CEO**

**09/16/2022**

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

\_\_\_\_\_  
Date