

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000005868

Entity Name: TRIPLE-S VIDA, INC.**Current Principal Place of Business:**1052 AVENIDA MUNOZ RIVERA
SAN JUAN PR 00927, FL**Current Mailing Address:**PO BOX 363786
SAN JUAN PR 00936-3786, FL US**FEI Number:** 66-0258488**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NORTHWEST REGISTERED AGENT LLC
7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 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:** NORTHWEST REGISTERED AGENT

03/09/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	CARRION CRESPO, ARTURO
Address	PO BOX 363786
City-State-Zip:	SAN JUAN PR 00936-3786

Title	VP
Name	GONZALEZ, RAMON
Address	PO BOX 363786
City-State-Zip:	SAN JUAN PR 00936-3786 AL

Title	S
Name	RODRIGUEZ RAMOS, CARLOS
Address	PO BOX 363786
City-State-Zip:	SAN JUAN PR 00936-3786

Title	T
Name	ROMAN JIMENEZ, JUAN J
Address	PO BOX 363786
City-State-Zip:	SAN JUAN PR 00936-3786

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: ARTURO CARRION CRESPO

PRESIDENT

03/09/2020

Electronic Signature of Signing Officer/Director Detail

Date