

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000002237

**Entity Name:** SENTIRE MEDICAL SYSTEMS, INC.

**Current Principal Place of Business:**

10455 RIVERSIDE DRIVE  
SUITE 210  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

10455 RIVERSIDE DRIVE  
SUITE 210  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 45-3646642

**Certificate of Status Desired:** No

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

SAUNDERS, KARL  
10455 RIVERSIDE DRIVE  
SUITE 210  
PALM BEACH GARDENS, FL 33410 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            DIR/PRES  
Name            KRASNE, DAVID  
Address        70 ROCKTOWN LAMBERTVILLE RD  
City-State-Zip: LAMBERTVILLE NJ 08530

Title            DIR  
Name            CHENG, PENG  
Address        SV TECH VENTURES  
                  543 BRYANT STREET  
City-State-Zip: PALO ALTO CA 94301

Title            DIR  
Name            DIAMOND, JONATHAN  
Address        10455 RIVERSIDE DRIVE  
                  SUITE 210  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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:** DAVID KRASNE

**CEO**

**01/15/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Directe

\_\_\_\_\_  
Date