

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000004912

Entity Name: FIRSTHAND HEALTH, INC.

Current Principal Place of Business:

205 HUDSON STREET, 8TH FLOOR
NEW YORK, NY 10013

Current Mailing Address:

205 HUDSON STREET, 8TH FLOOR
NEW YORK, NY 10013 US

FEI Number: 87-2609282

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DP
Name MALIK, SAMIR
Address 205 HUDSON STREET, 8TH FLOOR
City-State-Zip: NEW YORK NY 10013

Title CEO
Name MALIK, SAMIR
Address 205 HUDSON STREET, 8TH FLOOR
City-State-Zip: NEW YORK NY 10013

Title D
Name HAYEK, ANDREW
Address 205 HUDSON STREET, 8TH FLOOR
City-State-Zip: NEW YORK NY 10013

Title D
Name ROBBINS, BEN
Address 205 HUDSON STREET, 8TH FLOOR
City-State-Zip: NEW YORK NY 10013

Title DS
Name LALITHAKUMAR, ANANTH
Address 205 HUDSON STREET, 8TH FLOOR
City-State-Zip: NEW YORK NY 10013

Title D
Name ROBERTS, CORY
Address 205 HUDSON STREET, 8TH FLOOR
City-State-Zip: NEW YORK NY 10013

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: SAMIR MALIK

CEO

03/30/2023

Electronic Signature of Signing Officer/Director Detail

Date