

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000089892

Entity Name: TRAUMAFX SOLUTIONS INC.

Current Principal Place of Business:

1250 HARRIS BRIDGE ROAD
ANDERSON, SC 29621

Current Mailing Address:

1250 HARRIS BRIDGE ROAD
ANDERSON, SC 29621 US

FEI Number: 46-4281028

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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 PRESIDENT AND TREASURER
Name JOHNSON, ROSS
Address 1250 HARRIS BRIDGE ROAD
City-State-Zip: ANDERSON SC 29621

Title VP
Name HESTER, RICHARD ALAN
Address 1250 HARRIS BRIDGE ROAD
City-State-Zip: ANDERSON SC 29621

Title SECRETARY, DIRECTOR
Name HAABESTAD, PETER
Address 1250 HARRIS BRIDGE ROAD
City-State-Zip: ANDERSON SC 29621

Title CFO
Name OWENS, DUANE A.
Address 1001 EAST PALM AVENUE
City-State-Zip: TAMPA FL 33605

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: DUANE A. OWENS

CFO

05/04/2020

Electronic Signature of Signing Officer/Director Detail

Date