

STATE OF CALIFORNIA

CORPORATION

1500 11th Street

California Secretary of State

Office of the Secretary of State

STATEMENT OF INFORMATION

BA20241570587

For Office Use Only



File No.: BA20241570587 Date Filed: 8/30/2024

		California 95814			Date 1 lieu. 0/30/2024	
	(916) 657-544	5				
Entity Dotaila						
Entity Details Corporation Name				BE Medical Inc.		
Entity No.				6366299		
Formed In				LIFORNIA		
	nal Office of Corn	oration				
Street Address of Principal Office of Corporation Principal Address				2219 MAIN ST		
				STE #786		
			SA	NTA MONICA, CA 904	05	
Mailing Address of Corp	ooration					
Mailing Address				2219 MAIN ST STE #786		
				SANTA MONICA, CA 90405		
Attention						
Street Address of Califo	rnia Office of Corr	ooration				
Street Address of California Office				None		
Officers						
Officer Name	Officer Address		Position(s)			
+ Nabeel Ali	2219 MAIN	2219 MAIN ST		Chief Executive Officer, Chief Financial Officer, Secretary		
STE #786						
	SANTA MOI	NICA, CA 90405				
Additional Officers						
Officer Name		Officer Address	5	Position	Stated Position	
			None Enter	cu		
Directors						
Director Name				Director Address		
+ Nabeel Ali				2219 MAIN ST		
				STE #786		
			SAN	NTA MONICA, CA 904	05	
The number of va	acancies on Bo	ard of Directors is: 0				
Agent for Service of Pro	cess					
Agent Name				oeel Ali		
Agent Address				2219 MAIN ST		
				STE # 786 SANTA MONICA, CA 90405		
Type of Business						
Type of Business				Medicine		
Email Notifications						
Opt-in Email Notifications				Yes, I opt-in to receive entity notifications via email.		

No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.						
Electronic Signature						
By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.						
Nabeel Ali	08/30/2024					
Signature	Date					