

STATE OF CALIFORNIA

CORPORATION

Office of the Secretary of State

STATEMENT OF INFORMATION

BA20250036723

For Office Use Only



FORM	1500 11th St	California 95814				File No.: BA20250036723 Date Filed: 1/6/2025	
Entity Details							
Corporation Name				VYAS & TRIVEDI MEDICAL, INC.			
Entity No. Formed In				6512457 CALIFORNIA			
			CAL	FORM	4		
Street Address of Princi Principal Address	-	rporation	12/19				
Principal Address				1248 N. LAUREL AVE. APT 401			
			WES	ST HOLL	YWOOD, CA 9	0046	
Mailing Address of Corp	ooration						
Mailing Address				1248 N. LAUREL AVE. APT 401			
					YWOOD, CA 9	0046	
Attention							
Street Address of Califo	ornia Office of Co	orporation					
Street Address of California Office				1248 N. LAUREL AVE.			
				APT 401 WEST HOLLYWOOD, CA 90046			
Officers							
Officer Nam	e	Officer Address				Position(s)	
+ Hirsh Trivedi	AP.	48 N. LAUREL AVE. T 401	Chief Executive Officer, Secretary				
		ST HOLLYWOOD, CA 90046					
+ Jessica Vyas 1248 N. LAUREL AVE. APT 401 WEST HOLLYWOOD, CA 90046			Chief Financial Officer				
Additional Officers							
Officer N	lame	Officer Address		F	Position	Stated Position	
		None E	Entere	d			
Directors			1				
Director Name			Director Address				
+ Hirsh Trivedi				1248 N. LAUREL AVE. APT 401 WEST HOLLYWOOD, CA 90046			
+ Jessica Vyas			1248 N. LAUREL AVE. APT 401 WEST HOLLYWOOD, CA 90046				
The number of va	acancies on E	Board of Directors is: 0	1				

Agent Address	1248 N. LAUREL AVE. APT 401 WEST HOLLYWOOD, CA 90046				
Type of Business					
Type of Business	Medical				
Email Notifications					
Opt-in Email Notifications	No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.				
Labor Judgment 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.					
Levi Barlavi	01/06/2025				
Signature	Date				