

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 410042

**Entity Name:** PREFERRED MEDICAL PLAN, INC.

**Current Principal Place of Business:**

10860 SW 88TH ST  
MIAMI, FL 33176

**Current Mailing Address:**

10860 SW 88TH ST  
MIAMI, FL 33176 US

**FEI Number:** 59-1419293

**Certificate of Status Desired:** No

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

FOX, KEVIN DR.  
7483 CORAL WAY BUILDING  
SUITE #102  
MIAMI, FL 33155 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:** DR. KEVIN FOX

06/29/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR	Title	DIRECTOR
Name	FOX, KEVIN DR.	Name	FOX, GREG DR.
Address	7483 CORAL WAY BUILDING SUITE #102	Address	7483 CORAL WAY BUILDING SUITE #102
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	MIAMI FL 33155

*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:** DR. KEVIN FOX

DIRECTOR

06/29/2020

Electronic Signature of Signing Officer/Director Detail

Date