

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000010454

Entity Name: HERSOL MEDICAL PLAN, INC.

Current Principal Place of Business:

698 N. HOMESTEAD BLVD., SUITE 100
HOMESTEAD, FL 33030

Current Mailing Address:

P. O. BOX 521850
MIAMI, FL 33152

FEI Number: 04-3593023

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JOSEPH, HERNANDEZ
12861 SW 198TH TERRACE
MIAMI, FL 33177 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	D	Title	DIRECTOR
Name	HERNANDEZ, JOSEPH	Name	HERNANDEZ, JOSEPH A
Address	P. O. BOX 521850	Address	P. O. BOX 521850
City-State-Zip:	MIAMI FL 33152	City-State-Zip:	MIAMI FL 33152

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: JOSEPH HERNANDEZ

DIRECTOR

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date