## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048800

Entity Name: HEALTHSUN HEALTH PLANS, INC.

**Current Principal Place of Business:** 

3250 MARY STREET SUITE 400

COCONUT GROVE, FL 33133

**Current Mailing Address:** 

200 S. BISCAYNE BLVD. SUITE 4410

MIAMI, FL 33131 US

FEI Number: 20-0982649 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AUERBACH, MARC H 200 S. BISCAYNE BLVD. SUITE #4410 MIAMI, FL 33131 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

FILED Apr 26, 2016

**Secretary of State** 

CC9499100574

Officer/Director Detail:

Title DP Title DV

Name FUSTER, ALEXANDER Name ALVAREZ, CLAUDIO

Address 3250 MARY STREET, SUITE 300 Address 3250 MARY STREET, SUITE 300
City-State-Zip: COCONUT GROVE FL 33133 City-State-Zip: COCONUT GROVE FL 33133

Title DT

Name CORONA, RAMON

Address 3250 MARY STREET, SUITE 300
City-State-Zip: COCONUT GROVE FL 33133

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: ALEXANDER FUSTER

Electronic Signature of Signing Officer/Director Detail

CEO

04/26/2016