

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000024009

Entity Name: COVERAGE CURE INC

Current Principal Place of Business:

609 SW 16TH CT
FT LAUDERDALE, FL 33315

Current Mailing Address:

609 SW 16TH CT
FT LAUDERDALE, FL 33315 US

FEI Number: 27-2132651

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITEMAN, IAN
609 SW 16TH CT
FT LAUDERDALE, FL 33315 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: IAN WHITEMAN

03/28/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name WHITEMAN, IAN
Address 609 SW 16TH CT
City-State-Zip: FT LAUDERDALE FL 33315

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: IAN WHITEMAN

PRESIDENT

03/28/2025

Electronic Signature of Signing Officer/Director Detail

Date