

**2022 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P18000016342

**Entity Name:** FLORIDACARE HEALTH PLANS, INC.

**Current Principal Place of Business:**

6840 SW 40TH ST  
201-A  
MIAMI, FL 33155

**FILED**  
**Apr 05, 2022**  
**Secretary of State**  
**3990597562CC**

**Current Mailing Address:**

6840 SW 40TH ST  
201-A  
MIAMI, FL 33155 US

**FEI Number: 82-4632870**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	CEO	Title	CFO
Name	VICTORERO, GRACIELA V	Name	DURET, MARIA
Address	6840 SW 40TH ST 201-A	Address	6840 SW 40TH ST 201-A
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: MARIA DURET**

**CFO**

**04/05/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date