| 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: JONATHAN ARMALIN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

3521 WEST BROWARD BLVD. 208 LAUDERHILL, FL 33312

# **Current Mailing Address:**

3521 WEST BROWARD BLVD. 208 LAUDERHILL, FL 33312 US

## FEI Number: 82-5445131

## Name and Address of Current Registered Agent:

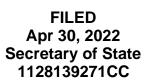
MATHIS, JACINTA M 10524 MOSS PARK ROAD, SUITE 204-641 ORLANDO, FL 32832 US

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                 | : JACINTA M. MATHIS                      |                 |                                | 04/30/2022 |  |
|---------------------------|--|-----------------|--------------------------------|------------|--|
|                           | Electronic Signature of Registered Agent |                 |                                | Date       |  |
| Officer/Director Detail : |  |                 |                                |            |  |
| Title                     | PRESIDENT                                | Title           | VP                             |            |  |
| Name                      | ARMALIN, JONATHAN                        | Name            | DAUPHIN, GARY                  |            |  |
| Address                   | 3521 WEST BROWARD BLVD.<br>208           | Address         | 3521 WEST BROWARD BLVD.<br>208 |            |  |
| City-State-Zip:           | LAUDERHILL FL 33312                      | City-State-Zip: | LAUDERHILL FL 33312            |            |  |
| Title                     | TREASURER                                | Title           | SECRETARY                      |            |  |
| Name                      | MOHORN III, WILLIE BERNARD               | Name            | MCKAIL, LOVELL                 |            |  |
| Address                   | 3521 WEST BROWARD BLVD.<br>208           | Address         | 3521 WEST BROWARD BLVD.<br>208 |            |  |
| City-State-Zip:           | LAUDERHILL FL 33312                      | City-State-Zip: | LAUDERHILL FL 33312            |            |  |

Certificate of Status Desired: No

04/30/2022 Date



#### 2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000042820

Entity Name: NATIONWIDE HEALTHCARE BROKERS CORPORATION

**Current Principal Place of Business:**