

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000000221

Entity Name: 123 HEALTH PLAN, INC.

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1301 INTERNATIONAL PARKWAY  
SUITE 120  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

1301 INTERNATIONAL PARKWAY  
SUITE 120  
SUNRISE, FL 33323

**New Mailing Address:**

FEI Number: 30-0373243

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SEIGEL, JONATHAN  
1301 INTERNATIONAL PARKWAY  
SUNRISE, FL 33323 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D/P  
Name: SEIGEL, JONATHAN  
Address: 6231 NW 98TH DRIVE  
City-St-Zip: PARKLAND, FL 33076

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: JONATHAN SEIGEL

D

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date