2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# P02000131907

Entity Name: HEALTHCARE PLANS, INC.

Current Principal Place of Business:

1870 MARINERS LANE
WESTON, FL 33327

New Principal Place of Business:

4300 N UNIVERSITY DRIVE
E-106
LAUDERHILL, FL 33351

Current Mailing Address:

1870 MARINERS LANE
WESTON, FL 33327

New Mailing Address:

4300 N UNIVERSITY DRIVE
E-106
LAUDERHILL, FL 33351

FEI Number: 56-2306863 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLLANDER, MARK
11410 N KENDALL DR, STE 207
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

JONATHAN, SILVERSTEIN
4300 N UNIVERSITY DRIVE
E-106
LAUDERHILL, FL 33351 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: JONATHAN SILVERSTEIN 04/26/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: OD ( ) Delete
Name: SILVERSTEIN, STEVEN
Address: 1870 MARINERS LANE
City-St-Zip: WESTON, FL 33327

Title: OD ( ) Delete
Name: SKOLE, JASON BENNETT
Address: 6365 NW 23RD ST
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JASON SKOLE OD 04/26/2004
Electronic Signature of Signing Officer or Director Date