## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000013279

Entity Name: AAA HEALTHCARE PLANS, INC.

FILED Apr 10, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2000 W COMMERCIAL BLVD 3333 W COMMERCIAL BLVD SUITE 100 SUITE 103

FT LAUDERDALE, FL 33309 FT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

2000 W COMMERCIAL BLVD3333 W COMMERCIAL BLVDSUITE 100SUITE 103FT LAUDERDALE, FL 33309FT LAUDERDALE, FL 33309

FEI Number: 05-0552536 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SLAKMAN, JOEL
2000 W COMMERCIAL BLVD
STE 100
FT LAUDERDALE, FL 33309 US
SLAKMAN, JOEL
3333 W COMMERCIAL BLVD
STE 103
FT LAUDERDALE, FL 33309 US
FT LAUDERDALE, FL 33309 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: 04/10/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: I

Name: SLAKMAN, JOEL

Address: 3333 W COMMERCIAL BLVD SUITE 103

City-St-Zip: FT. LAUDERDALE, FL 33309

Title: VP

Name: NICHOLSBERG, ERIC

Address: 3333 W COMMERCIAL BLVD SUITE 103

City-St-Zip: FT LAUDERDALE, FL 33309

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: ERIC NICHOLSBERG VP 04/10/2012