2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000071873

Entity Name: GOT HEALTH COVERAGE, INC.

FILED Apr 05, 2012 Secretary of State

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

7200 W COMMERCIAL BLVD 629 KAPPOCK STREET SUITE 206 #6R

SUITE 206 #6R LAUDERHILL, FL 33319 RIVERDALE, NY 10463

Current Mailing Address: New Mailing Address:

7200 W COMMERCIAL BLVD 629 KAPPOCK STREET SUITE 206 #6R

LAUDERHILL, FL 33319 RIVERDALE, NY 10463

FEI Number: 27-0816912 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:

HYMAN, MARIAN
7200 W COMMERCIAL BLVD
SUITE 206
HYMAN, MARIAN
608 CASCADE FALLS DRIVE
FORT LAUDERDALE, FL. 33327 US

SUITE 206 FORT LAUDERDALE, FL 33327 US LAUDERHILL, FL 33319 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: MARIAN HYMAN 04/05/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: HYMAN, MARIAN Address: 629 KAPPOCK STREET City-St-Zip: RIVERDALE, NY 10463

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: MARIAN HYMAN P 04/05/2012