

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156909

Entity Name: SOLSTICE BENEFITS, INC.**Current Principal Place of Business:**7901 SW 6TH COURT
SUITE 400
PLANTATION, FL 33324**Current Mailing Address:**PO BOX 19199
PLANTATION, FL 33318**FEI Number:** 14-1917982**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
DEPARTMENT OF FINANCIAL SERVICES
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name FLAX, MICHAEL DD.D.S.
Address 7901 SW 6TH COURT, SUITE 400
City-State-Zip: PLANTATION FL 33324

Title PRESIDENT, DIRECTOR, CEO
Name WEISS, LEONARD A
Address 7901 SW 6TH COURT
SUITE 400
City-State-Zip: PLANTATION FL 33324

Title DIRECTOR
Name FEINSTEIN, MARK D
Address 7901 SW 6TH COURT
SUITE 400
City-State-Zip: PLANTATION FL 33324

Title DIRECTOR
Name ROLNICK, AUDIE M
Address 7901 SW 6TH COURT
SUITE 400
City-State-Zip: PLANTATION FL 33324

Title SECRETARY, COO, DIRECTOR
Name FERRERA, CARLOS
Address 7901 SW 6TH COURT
SUITE 400
City-State-Zip: PLANTATION FL 33324

Title CFO, TREASURER, DIRECTOR
Name WEISZNER, NACHMAN
Address 7901 SW 6TH COURT
SUITE 400
City-State-Zip: PLANTATION FL 33324

Title DIRECTOR
Name LANDAU, RICHARD
Address 7901 SW 6TH COURT
SUITE 400
City-State-Zip: PLANTATION FL 33324

Title COMPLIANCE OFFICER
Name EVESLAGE, TAMARA J
Address 7901 SW 6TH COURT
SUITE 400
City-State-Zip: PLANTATION FL 33324

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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: LEONARD WEISS**PRESIDENT****01/07/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WEISS, SHAUN
Address	520 WEST 43RD STREET APT 10K
City-State-Zip:	NEW YORK NY 10036