

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000079092

**Entity Name:** PRICEMAN MEDICAL MANAGEMENT INC.

**Current Principal Place of Business:**

8528 SUMMERVILLE PLACE  
ORLANDO, FL 32819

**Current Mailing Address:**

8528 SUMMERVILLE PLACE  
ORLANDO, FL 32819 US

**FEI Number:** 47-5152612

**Certificate of Status Desired:** No

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

PRICEMAN MEDICAL MANAGEMENT INC  
9032 GREAT HERON CIRCLE  
ORLANDO, FL 32836 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:** GERALD PRICEMAN

05/28/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name PRICEMAN, GERALD  
Address 9032 GREAT HERON CIRCLE  
City-State-Zip: ORLANDO FL 32836

*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:** GERALD PRICEMAN

OWNER

05/28/2021

Electronic Signature of Signing Officer/Director Detail

Date