

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000058116

Entity Name: MEDICARE SOLUTIONS 101, INC.**Current Principal Place of Business:**20860 W. PENNSYLVANIA AVE.
DUNNELLON, FL 34431**Current Mailing Address:**20860 W. PENNSYLVANIA AVE.
DUNNELLON, FL 34431 US**FEI Number:** 81-3211671**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHEINMAN, DAVID D
11919 OAKLEAF DRIVE
DAVIE, FL 33330 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	V
Name	SMITH, DAN
Address	20860 W. PENNSYLVANIA AVE.
City-State-Zip:	DUNNELLON FL 34431

Title	PDT
Name	CLARK-SMITH, NICHOLE
Address	20860 W. PENNSYLVANIA AVE.
City-State-Zip:	DUNNELLON FL 34431

Title	CEO
Name	CLARK-SMITH, NICHOLE
Address	20860 W. PENNSYLVANIA AVE.
City-State-Zip:	DUNNELLON FL 34431

Title	CFO
Name	CLARK-SMITH, NICHOLE
Address	20860 W. PENNSYLVANIA AVE.
City-State-Zip:	DUNNELLON FL 34431

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: NICHOLE CLARK-SMITH

CEO

06/30/2020

Electronic Signature of Signing Officer/Director Detail_____
Date