

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000029030

Entity Name: HEALTH PROTECTION PLANS, INC.

Current Principal Place of Business:

17110 CYPRESS PRESERVE PARKWAY
ORLANDO, FL 32820

Current Mailing Address:

650 N. ALAFAYA TRAIL, STE. 101
P.O. BOX 780934
ORLANDO, FL 32878 US

FEI Number: 83-4313641

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SETHI, JAGTAR S
17110 CYPRESS PRESERVE PARKWAY
ORLANDO, FL 32820 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 P
Name SETHI, JAGTAR S
Address 17110 CYPRESS PRESERVE
PARKWAY
City-State-Zip: ORLANDO FL 32820

Title SECY
Name SETHI, ALKA
Address 17110 CYPRESS PRESERVE
PARKWAY
City-State-Zip: ORLANDO FL 32820

Title VP
Name SETHI, GAVINDER S
Address 2726 GALLOWS ROAD, # 305
City-State-Zip: VIENNA VA 22180

Title VP
Name SETHI, RACHNA
Address 337 LIPPERT AVE
City-State-Zip: FREMONT CA 94539

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: JAGTAR S SETHI

PRESIDENT

01/16/2020

Electronic Signature of Signing Officer/Director Detail

Date