

**2024 FOREIGN PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F20000005464

**Entity Name:** MORGAN MEDICAL MANAGEMENT & CONSULTANTS, INC.

**Current Principal Place of Business:**

2801 SE 1ST AVE, STE 301  
OCALA, FL 34471-0478

**Current Mailing Address:**

5010 SE 4TH AVE  
OCALA, FL 34480 US

**FEI Number:** 47-1129110

**Certificate of Status Desired:** No

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

QI, MARK  
5010 SE 4TH AVE  
OCALA, FL 34480 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:** MARK QI

10/28/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            DIR  
Name            QI, MARK  
Address        5010 SE 4TH AVE  
City-State-Zip: Ocala FL 34480

Title            DIR  
Name            LUO, LAN  
Address        5010 SE 4TH AVE  
City-State-Zip: Ocala FL 34480

*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:** MARK QI

**DIRECTOR**

10/28/2024

Electronic Signature of Signing Officer/Director Detail

Date