

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000006806

Entity Name: MYPLANADVOCATE INSURANCE SERVICES INC.

Current Principal Place of Business:

460 W 50TH NORTH STE 500
SALT LAKE, UT 84101

Current Mailing Address:

460 W 50TH NORTH STE 500
SALT LAKE, UT 84101 US

FEI Number: 87-3018949

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 KARFUNKEL, BARRY
Address 460 W 50TH NORTH STE 500
City-State-Zip: SALT LAKE UT 84101

Title PRESIDENT
Name MOODY, KYAL
Address 25022 MUSTANG DRIVE
City-State-Zip: LAGUNA HILLS CA 92653

Title TREASURER
Name STERNHELL, MARK
Address 50 MILE RD
City-State-Zip: MONTEBELLO NY 10901

Title SECRETARY
Name GALLAGHER, SEAN
Address 300 N END AVE #10D
City-State-Zip: NEW YORK NY 10282

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: KYAL MOODY

CEO

04/24/2022

Electronic Signature of Signing Officer/Director Detail

Date