

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 443593

FILED
Apr 30, 2008
Secretary of State

Entity Name: SEITLIN BENEFITS CORPORATION

Current Principal Place of Business:

9800 NW 41ST STREET
SUITE 300
MIAMI, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 025220
MIAMI, FL 331025220 US

New Mailing Address:

FEI Number: 59-1506636

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKMAN, M. STEPHEN
9800 NW 41ST STREET
SUITE 300
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAVIS, CAROLYN
Address: 9800 NW 41ST STREET, #300
City-St-Zip: MAIMI, FL 33178

Title: VST () Delete
Name: JACKMAN, STEPHEN M,
Address: 9800 NW 41ST STREET, #300
City-St-Zip: MIAMI, FL 33178

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: DAVIS, CAROLYN
Address: 9800 NW 41ST STREET, #300
City-St-Zip: MAIMI, FL 33178

Title: SEC (X) Change () Addition
Name: JACKMAN, STEPHEN M,
Address: 9800 NW 41ST STREET, #300
City-St-Zip: MIAMI, FL 33178

Title: TREA () Change (X) Addition
Name: CORNISH, THOMAS
Address: 9800 NW 41ST STREET, SUITE 300
City-St-Zip: MIAMI, FL 33178

Title: PRES () Change (X) Addition
Name: MORGAN, DAVE
Address: 9800 NW 41ST STREET, SUITE 300
City-St-Zip: MIAMI, FL 33178

Title: VP () Change (X) Addition
Name: BORREGO, NORMA
Address: 9800 NW 41ST STREET, SUITE 300
City-St-Zip: MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS CORNISH

TREA

04/30/2008

Electronic Signature of Signing Officer or Director

Date