

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005877

FILED
Apr 11, 2008
Secretary of State

Entity Name: UNIVERS WORKPLACE BENEFITS, INC.

Current Principal Place of Business:

897 12TH STREET
HAMMONTON, NJ 08037

New Principal Place of Business:

Current Mailing Address:

555 PLEASANTVILLE ROAD STE 160 SOUTH
BRIARCLIFF MANOR, NY 10510

New Mailing Address:

FEI Number: 22-3325321 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DS () Delete
Name: NEWBORN, ERNEST J II
Address: 555 PLEASANTVILLE ROAD STE 160 SOUTH
City-St-Zip: BRIARCLIFF, NY 10510

Title: P () Delete
Name: MORANO, GREG
Address: 897 12TH STREET
City-St-Zip: HAMMONTON, NJ 08037

Title: T () Delete
Name: HESS, DAVE
Address: 555 PLEASANTVILLE ROAD STE 160 SOUTH
City-St-Zip: BRIARCLIFF MANOR, NY 10510

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: O'BRIEN, JAMES
Address: 555 PLEASANTVILLE ROAD STE 160 SOUTH
City-St-Zip: BRIARCLIFF MANOR, NY 10510

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: ERNEST J. NEWBORN, II

SD

04/11/2008

Electronic Signature of Signing Officer or Director

_____ Date