

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102700

Entity Name: AYL BENEFITS, INC.

FILED  
Mar 31, 2010  
Secretary of State

**Current Principal Place of Business:**

9733 NW 45TH LANE  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

9733 NW 45TH LANE  
DORAL, FL 33178

**New Mailing Address:**

FEI Number: 26-1404108

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LASTRA, ALDO  
9733 NW 45TH LANE  
DORAL, 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  
Name: LASTRA, YOLANDA F  
Address: 9733 NW 45TH LANE  
City-St-Zip: DORAL, FL 33178

Title: VP  
Name: LASTRA, ALDO  
Address: 9733 NW 45TH LANE  
City-St-Zip: DORAL, FL 33178

Title: SEC  
Name: LASTRA, ALDO  
Address: 9733 NW 45TH LANE  
City-St-Zip: DORAL, FL 33178

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: ALDO LASTRA

VP

03/31/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date