

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L80573

Entity Name: BENEFIT REVIEW SERVICE, INC.

Current Principal Place of Business:

368 NE 195TH STREET
MIAMI, FL 33179

Current Mailing Address:

P. O. BOX 601173
NORTH MIAMI BEACH, FL 33160

FEI Number: 65-0204970

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUBERMAN, RICHARD
368 NE 195TH STREET
MIAMI, FL 33179 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 PSD
Name HUBERMAN, RICHARD
Address 368 NE 195TH STREET
City-State-Zip: MIAMI FL 33179

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: RICHARD HUBERMAN

PRESIDENT

04/22/2014

Electronic Signature of Signing Officer/Director Detail

Date