2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005046

City-St-Zip:

TALLAHASSEE, FL 32304

FILED Jan 29, 2008 Secretary of State

Entity Na	me: CARDB	ENEFITS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
102 NE 2ND ST SUITE 381 BOCA RATON, FL 33432				4244 W. TENNESSEE ST. #205 TALLAHASSEE, FL 32304	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
102 NE 2ND ST SUITE 381 BOCA RATON, FL 33432				4244 W. TENNESSEE ST. #205 TALLAHASSEE, FL 32304	
FEI Number	: 20-5284664	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
GALLETS, EUNICE 2825 SW 22ND AVE. STE. 105 DELRAY BEACH, FL 33445 US				LASALA, MICHAEL 4244 W. TENNESSEE ST. #205 TALLAHASSEE, FL 32304 US	
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: MICHAEL LASALA				01/29/2008	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LASALA, MICH	IESSEE ST. #205	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LASALA, MICH	IESSEE ST. #205	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	LASALA, MICH) Delete HALE JESSEE ST. #205	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: MICHAEL LASALA **PRES** 01/29/2008