2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # J52908

1. Entity Name
CORPORATE BENEFITS CENTER, INC.

Principal Place of Business	Mailing Address
2145 14TH AVE SUITE 22 VERO BEACH, FL 32960 US	2145 14TH AVE SUITE 22 VERO BEACH, FL 32960 US

01112007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2753665

Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KOWN, JACK R.
2145 14TH AVE
VERO BEACH, FL 32960

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	OSTROM, LYLE R.
STREET ADDRESS	80 ROYAL PALM BLVD.,#204
CITY ST ZIP	VERO BEACH, FL
TITLE	PD
NAME	KOWN, JACK
STREET ADDRESS	2145 14TH AVE SUITE 22
CITY ST ZIP	VERO BEACH, FL 32960
TITLE	TD
NAME	VANVORST, ROBERT K.
STREET ADDRESS	2145 14TH AVE STE 22
CITY ST ZIP	VERO BEACH, FL 32960
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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01/24/07-80067-019 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jack R Kown Pres 1/11/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR