

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K44740

FILED  
Nov 01, 2004  
Secretary of State

**Entity Name:** EMPLOYERS BENEFIT SERVICES, INC.

**Current Principal Place of Business:**

11900 BISCAYNE BLVD  
SUITE 260  
MIAMI, FL 33181 US

**New Principal Place of Business:**

**Current Mailing Address:**

11900 BISCAYNE BLVD  
SUITE 260  
MIAMI, FL 33181 US

**New Mailing Address:**

**FEI Number:** 65-0082133      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FREIRE, JOE  
12785 N. BAYSHORE DR.  
MIAMI, FL 33181 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FREIRE, JOE  
Address: 12785 N. BAYSHORE DR.  
City-St-Zip: MIAMI, FL 33181

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOE FREIRE

MR.

11/01/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date