## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039590

Entity Name: C1 BENEFITS, LLC

**FILED** Apr 29, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2714 REW CIRCLE 2 W. OAKLAND AVE.

200 300 OCOEE, FL 34761 OAKLAND, FL 34760

**New Mailing Address: Current Mailing Address:** 

2714 REW CIRCLE PO BOX 1207

OAKLAND, FL 34760 300 OCOEE, FL 34761

FEI Number: 20-1153753 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MOHAWK 3, LLC MOHAWK 3, LLC 2710 REW CIRCLE PO BOX 1207

OAKLAND, FL 34760 100 US OCOEE, FL 34761 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.

ADDITIONS/CHANGES:

SIGNATURE: 04/29/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

MOHAWK 3, LLC, MOHAWK 3, LLC, Name: Name: Address: 2710 REW CIRCLE, STE 100 Address: PO BOX 1207 City-St-Zip: OCOEE, FL 34761 City-St-Zip: OAKLAND, FL 34760

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition CUDA CAPITAL, LLC, CUDA CAPITAL, LLC, Name: Name:

Address: 3303 MIDDLESEX RD Address: PO BOX 1207 City-St-Zip: ORLANDO, FL 32803 City-St-Zip: OAKLAND, FL 34760

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SEAN CUDA **PRES** 04/29/2005