

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000081622

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: HFG BENEFITS ONLINE, LLC

**Current Principal Place of Business:**

5201 BLUE LAGOON DR.  
PENTHOUSE  
MIAMI, FL 33126 US

**New Principal Place of Business:**

**Current Mailing Address:**

5201 BLUE LAGOON DR.  
PENTHOUSE  
MIAMI, FL 33126 US

**New Mailing Address:**

FEI Number: 80-0248352

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CORTES, YAMILA  
13298 SW 39TH STREET  
DAVIE, FL 33330 US

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

ORDAS, ISABEL  
12810 SW 43 DR. # 117B  
MIAMI, FL 33175 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: ISABEL ORDAZ

04/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ARTEAGA, JESUS  
Address: 333 NE 24TH STREET, APT302  
City-St-Zip: MIAMI, FL 33137 US

Title: MGRM ( ) Delete  
Name: GUEDE, GILBERT  
Address: 2661 SW 156TH PLACE  
City-St-Zip: MIAMI, FL 33185 US

**ADDITIONS/CHANGES:**

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

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

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 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: JESUS ARTEAGA

MGRM

04/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date