2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# N96000003962

Entity Name: PBCOGS, INC.

Current Principal Place of Business:

1515 N. FLAGLER DR
SUITE 700
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

1515 N. FLAGLER DR
SUITE 700
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 65-0682960 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REILLY, ROBERTA MD
1515 N. FLAGLER DR
SUITE 700
WEST PALM BEACH, FL 33401 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TORRES, MICHELE B
Address: 3600 FOREST HILL,, SUITE 1
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: VP ( ) Delete
Name: RILEY, ROBERTA
Address: 1515 FLAGLER #700
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T ( ) Delete
Name: HAUKERAIN, GLORIA
Address: 4671 S CONGRESS
City-St-Zip: LOWER WEST PALM, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HAUKERAIN, GLORIA MD
Address: 4671 S CONGRESS
City-St-Zip: WEST PALM BEACH, FL 33461 US

Title: PP (X) Change ( ) Addition
Name: REILLY, ROBERTA
Address: 1515 FLAGLER #700
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SEC (X) Change ( ) Addition
Name: KOTZEN, JEFFERY MD
Address: 200 BUTLER STREET STE 303
City-St-Zip: WEST PALM BEACH, FL 33407

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTA REILLY PP 04/27/2008

Electronic Signature of Signing Officer or Director — Date