## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000013755

City-St-Zip: BOCA RATON, FL 33498

Entity Name: PREMIER BENEFITS CONSULTANTS, INC.

FILED May 01, 2006 Secretary of State

,			,		
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	/RIDGE CIRCLE TON, FL 33498				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	/RIDGE CIRCLE TON, FL 33498				
FEI Number:	: 65-1074133	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:					
C/O ANTH 19143 SKY	AGEMENT COR IONY V. SALER (RIDGE CIRCLE TON, FL 33498	NO E			
	named entity sue of Florida.	ubmits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	Signature of Registered Ag	ent	Date	
		(2)(b), F.S., the corporation did n Trust Fund Contribution (  ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEOP ()[ SALERNO, ANTH 19143 SKYRIDG BOCA RATON, F	E CIRCLE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	T ()[ SALERNO, ANTH 19143 SKYRIDG		Title: Name: Address:	( ) Change ( ) Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY V. SALERNO PRES 05/01/2006