

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080886

Entity Name: BETTER BENEFITS GROUP, INC.

FILED  
Sep 05, 2006  
Secretary of State

## Current Principal Place of Business:

261 GOLFVIEW DR  
TEQUESTA, FL 33469

## New Principal Place of Business:

## Current Mailing Address:

261 GOLFVIEW DR  
TEQUESTA, FL 33469

## New Mailing Address:

FEI Number: 20-1184898

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BORIS, DARYL  
261 GOLFVIEW DR  
TEQUESTA, FL 33469 US

## Name and Address of New Registered Agent:

BORIS, DARYLL  
261 GOLFVIEW DR  
TEQUESTA, FL 33469 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: DARYLL BORIS

09/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BORIS, DARYL  
Address: 261 GOLFVIEW DR  
City-St-Zip: TEQUESTA, FL 33469

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BORIS, DARYLL  
Address: 261 GOLFVIEW DR  
City-St-Zip: TEQUESTA, FL 33469

Title: V ( ) Change (X) Addition  
Name: BORIS, PAUL S  
Address: 261 GOLFVIEW DR  
City-St-Zip: TEQUESTA, FL 33469

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: DARYLL BORIS

P

09/05/2006

Electronic Signature of Signing Officer or Director

Date