

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000024875

FILED
Feb 25, 2008
Secretary of State

Entity Name: US HEALTH BENEFITS GROUP, INC.

Current Principal Place of Business:

555 SW 12TH AVE.
SUITE 120
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

800 W CYPRESS CREEK RD SUITE 470
FT LAUDERDALE, FL 33309

New Mailing Address:

555 SW 12TH AVE.
SUITE 120
POMPANO BEACH, FL 33069

FEI Number: 51-0570093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGEL, LARRY
800 W CYPRESS CREEK RD SUITE 470
FT LAUDERDALE, FL 33309 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KNASTER, HOWARD
Address: 555 SW 12TH AVE STE. 120
City-St-Zip: POMPAN0 BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: HOWARD KNASTER

D

02/25/2008

Electronic Signature of Signing Officer or Director

Date