

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000154763

Entity Name: GLOBAL MED BENEFITS, INC.

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

1500 WEST CYPRESS CREEK ROAD SUITE 202  
FORT LAUDERDALE, FL 33309

## Current Mailing Address:

1500 WEST CYPRESS CREEK ROAD SUITE 202  
FORT LAUDERDALE, FL 33309

## New Principal Place of Business:

1001 WEST CYPRESS CREEK ROAD  
SUITE 207  
FORT LAUDERDALE, FL 33309

## New Mailing Address:

1001 WEST CYPRESS CREEK ROAD  
SUITE 207  
FORT LAUDERDALE, FL 33309

FEI Number: 22-3949340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

SCHUMER, JARRED R P  
1001 W CYPRESS CREEK RD  
SUITE # 207  
FORT LAUDERDALE, FL 33309 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: JARRED SCHUMER

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: SCHUMER, JARRED  
Address: 1500 WEST CYPRESS CREEK ROAD SUITE 202  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: DVPS ( ) Delete  
Name: MOSKOWITZ, CHARLES  
Address: 1500 WEST CYPRESS CREEK ROAD SUITE 202  
City-St-Zip: FORT LAUDERDALE, FL 33309

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: SCHUMER, JARRED  
Address: 1001 WEST CYPRESS CREEK ROAD SUITE 207  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: DVPS (X) Change ( ) Addition  
Name: MOSKOWITZ, CHARLES  
Address: 1001 WEST CYPRESS CREEK ROAD SUITE 207  
City-St-Zip: FORT LAUDERDALE, FL 33309

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: JARRED SCHUMER

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date