

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000098751

FILED
Apr 24, 2008
Secretary of State

Entity Name: KOBREN INSIGHT GROUP, INC.

Current Principal Place of Business:

1281 GULF OF MEXICO DR., APT. 807
LONGBOAT KEY, FL 34228

New Principal Place of Business:

595 BAY ISLES ROAD, SUITE 120-F
LONGBOAT KEY, FL 34228

Current Mailing Address:

1281 GULF OF MEXICO DR., APT. 807
LONGBOAT KEY, FL 34228

New Mailing Address:

595 BAY ISLES ROAD, SUITE 120-F
LONGBOAT KEY, FL 34228

FEI Number: 04-3288212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOBREN, ERIC M
1281 GULF OF MEXICO DR., APT. 807
LONGBOAT KEY, FL 34228 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: PTD () Delete
Name: KOBREN, ERIC M
Address: 1281 GULF OF MEXICO DR., APT. 807
City-St-Zip: LONGBOAT KEY, FL 34228

Title: SD () Delete
Name: KOBREN, CATHERINE S
Address: 1281 GULF OF MEXICO DR., APT. 807
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D () Delete
Name: KOBREN, JACK
Address: 6382 REFLECTION POINT CIR.
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ERIC M KOBREN

PTD

04/24/2008

Electronic Signature of Signing Officer or Director

Date