2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# P07000122473

Entity Name: BENEFIT SPECIALISTS, INC.

Current Principal Place of Business:

4631 NORTHWEST 31ST AVENUE
SUITE 294
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

11555 HERON BAY BLVD.
SUITE 200
CORAL SPRINGS, FL 33076

Current Mailing Address:

4631 NORTHWEST 31ST AVENUE
SUITE 294
FORT LAUDERDALE, FL 33309

New Mailing Address:

11555 HERON BAY BLVD.
SUITE 200
CORAL SPRINGS, FL 33076

FEI Number: 22-3972341 **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:

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: PD ( ) Delete
Name: MOSS, STUART E
Address: 4631 NORTHWEST 31ST AVENUE SUITE 294
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: SD ( ) Delete
Name: GRENALD, SHANNICKA A
Address: 4631 NORTHWEST 31ST AVENUE SUITE 294
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MOSS, STUART E
Address: 11555 HERON BAY BLVD. #200
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VP/S (X) Change ( ) Addition
Name: GRENALD, SHANNICKA A
Address: 11555 HERON BAY BLVD. #200
City-St-Zip: CORAL SPRINGS, FL 33076

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: STUART E. MOSS PD 01/19/2009

Electronic Signature of Signing Officer or Director — Date