

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000063819

FILED
Apr 13, 2011
Secretary of State

Entity Name: US HEALTH AND LIFE BROKERS, INC.

Current Principal Place of Business:

3300 NE 191ST ST. UNIT#1018
MIAMI, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

3300 NE 191ST ST. UNIT#1018
MIAMI, FL 33180 US

New Mailing Address:

FEI Number: 27-3192664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETHEL, ALEXI
3300 NE 191ST ST. UNIT#1018
MIAMI, FL 33180 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

OFFICERS AND DIRECTORS:

Title: DIR
Name: BETHEL, ALEXI
Address: 3300 NE 191ST ST. UNIT#1018
City-St-Zip: MIAMI, FL 33180 US

Title: PRES
Name: BETHEL, ALEXI
Address: 3300 NE 191ST ST. UNIT#1018
City-St-Zip: MIAMI, FL 33180 US

Title: VP
Name: BETHEL, ALEXI
Address: 3300 NE 191ST ST. UNIT#1018
City-St-Zip: MIAMI, FL 33180 US

Title: SEC
Name: BETHEL, ALEXI
Address: 3300 NE 191ST ST. UNIT#1018
City-St-Zip: MIAMI, FL 33180 US

Title: TREA
Name: BETHEL, ALEXI
Address: 3300 NE 191ST ST. UNIT#1018
City-St-Zip: MIAMI, FL 33180 US

I hereby 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 all other like empowered.

SIGNATURE: ALEXI BETHEL

PRES

04/13/2011

Electronic Signature of Signing Officer or Director

Date