

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 26, 2004 8:00 am
Secretary of State

03-26-2004 90022 030 ***150.00

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1. Entity Name

EMPLOYEE BENEFITS OF FLORIDA, INC.



Principal Place of Business

8860 SW 57TH ST
MIAMI FL 33170
US

Mailing Address

8860 SW 57TH ST
#106
MIAMI FL 33170
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

CARRIAZO, ROBERT
8860 SW 57TH ST.
MIAMI FL 33173

7. Name and Address of New Registered Agent

Name

MARUCHY CARRIAZO

Street Address (P.O. Box Number is Not Acceptable)

8860 SW 57 ST.

City

MIAMI,

FL

Zip Code

33173

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Maruchy Carrizzo
SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when removing agent)

DATE

3/24/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME CARRIAZO, ROBERT
STREET ADDRESS 8860 SW 57TH ST.
CITY-ST-ZIP MIAMI FL 33173

TITLE PVST ☐ Delete
NAME CARRIAZO, MARUCHY
STREET ADDRESS 8860 SW 57TH ST.
CITY-ST-ZIP MIAMI FL 33173

TITLE D ☒ Delete
NAME CARRIAZO, DANIEL J.
STREET ADDRESS 8860 S.W. 57TH STREET
CITY-ST-ZIP MIAMI FL 33173

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V.P Employee ☒ Change ☐ Addition
NAME
STREET ADDRESS } same as indicated
CITY-ST-ZIP

TITLE PRESIDENT / Secretary Treasurer ☐ Change ☐ Addition
NAME MARUCHY CARRIAZO
STREET ADDRESS 8860 SW 57 STREET
CITY-ST-ZIP MIAMI, FL 33173

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Maruchy Carrizzo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/04

Date

305-220-5433

Daytime Phone #