

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P94000035168 (1)**  
1. Corporation Name

**INSURANCE BENEFITS SPECIALISTS, INC.**

Principal Place of Business

**8955 SW 6TH CT  
SUITE 137  
PLANTATION FL 33324  
US**

Mailing Address

**2269 S. UNIVERSITY DR.  
SUITE 137  
FT. LAUDERDALE FL 33324**

**FILED**  
**Jul 17 1998 8:00am**  
**Secretary of State**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**05/10/1994**

4. FEI Number

**65-0500136**

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**DALBERTY DEAN BERNAL, E DUARDO**  
**2269 S. UNIVERSITY DR.**  
**SUITE 137**  
**FT. LAUDERDALE FL 33324**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.005, Florida Statutes.

SIGNATURE

*[Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE

NAME **BERNAL EDUARDO**  
STREET ADDRESS **2269 S. UNIVERSITY DR.**  
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **VP** ☐ DELETE

NAME **BERNAL, MARLENE**  
STREET ADDRESS **2269 S. UNIVERSITY DR.**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33324**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**400002594304**

**-07/21/98--01080--016**

**\*\*\*150.00**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed on an attachment with an address.

SIGNATURE: *[Signature]*

**7-8-98**

CR2E034 (5/98)

*Phyl 2*

## **INSURANCE BENEFIT SPECIALIST**

2269 S. University Drive, Suite 137

Davie, FL 33324

Ph (954) 475-2028, 494-0629, Fx (954) 370-6270

July 8, 1998

**DIVISION OF CORPORATIONS  
ANNUAL REPORTS FILINGS  
PO BOX 1500  
TALLAHASSEE FL 32302-1500**

Dear Sir or Madam,

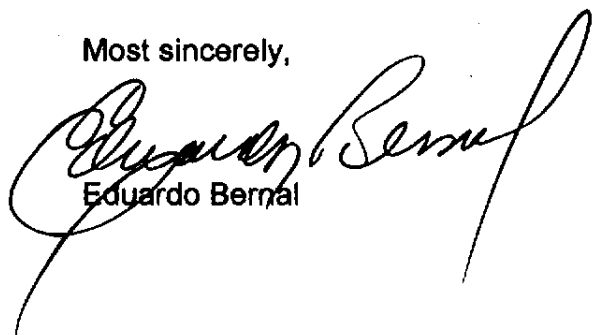
The purpose of this letter is to explain and assure you that we never received an initial notice (first notice) on **Document # P94000035168 (1)**. I spoke with Jane this afternoon and advised that I send you this letter along with the \$150 check.

I have already taken measures to insure that this will never happen again, in fact February of 99 has already been flagged to get this done ahead of schedule.

Again, I must thank you for this consideration that has been extended. You can bank that I will inquire every January, how soon I can pay for the Annual Report.

I am truly sorry that I never saw a first notice and once again thank you.

Most sincerely,

  
Eduardo Bernal