

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2007 8:00 am
Secretary of State

02-23-2007 90040 027 ***150.00

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1. Entity Name

ASSURED BENEFITS CORP.



Principal Place of Business

4425 POINCIANA ST., #5
LAUDERDALE BY THE SEA FL 33308
US

Mailing Address

6278 N. FEDERAL HWY
PMB 293
LAUDERDALE BY THE SEA FL 33308
US



2. Principal Place of Business - No P.O. Box #

4425 POINCIANA ST.
Suite, Apt. #, etc.
#2

3. Mailing Address

SAME
Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

LAUDERDALE BY THE SEA, FL.
Zip
33308
Country
BROWARD

City & State

Zip
Country

4. FEI Number 65-0677522

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARBONE, FRANKLIN D.
4425 POINCIANA ST. #2
FT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
CARBONE, FRANKLIN D
6278 NORTH FEDERAL HIGHWAY, S-293
FORT LAUDERDALE FL 33308 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VS
REMONLINO, JANIS
905 BROAD STREET D2
BLOOMFIELD NJ 07003 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
HARRIS, BARBARA
14225 SW 94 CIR. N. BLDG 11 102
MIAMI FL 33186 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VS
REMONLINO, JANIS
25 L NOB HILL
ROSELAND, N.J. 07068 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
CARBONE, FRANKLIN D
6278 NORTH FEDERAL HWY. PMB. 293
FT LAUDERDALE, FL. 33308 ☐ Change ☒ Addition

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Franklin D. Carbone FRANKLIN D. CARBONE, PRES. 2-12-07 954-489-1348

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #