

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000027661

FILED
Apr 03, 2009
Secretary of State

Entity Name: CORPORATE MEDICAL BENEFITS, INC.

Current Principal Place of Business:

24349 SUMMER WIND CT.
LUTZ, FL 33559

New Principal Place of Business:

11204 SAGINAW DR.
TAMPA, FL 33617

Current Mailing Address:

24349 SUMMER WIND CT.
LUTZ, FL 33559

New Mailing Address:

11204 SAGINAW DR.
TAMPA, FL 33617

FEI Number: 59-3510816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERDIGON, GEORGE L
24349 SUMMER WIND CT.
LUTZ, FL 33559 US

Name and Address of New Registered Agent:

PERDIGON, GEORGE L
11204 SAGINAW DR.
TAMPA, FL 33617 US

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: GEORGE L. PERDIGON

04/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PERDIGON, GEORGE L
Address: 24349 SUMMER WIND CT
City-St-Zip: LUTZ, FL 33559

Title: S () Delete
Name: PERDISON, K.J.
Address: 24349 SUMMER WIND CT
City-St-Zip: LUTZ, FL 33559

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PERDIGON, GEORGE L
Address: 11204 SAGINAW DR.
City-St-Zip: TAMPA, FL 33617

Title: S (X) Change () Addition
Name: PERDISON, K.J.
Address: 11204 SAGINAW
City-St-Zip: TAMPA, FL 33617

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: GEORGE L. PERDIGON

PRES

04/03/2009

Electronic Signature of Signing Officer or Director

Date