2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000092242

Entity Name: HR BENEFITS SERVICES, INC.

FILED Apr 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7205 NW 19 ST 208 MIAMI, FL 33126 **New Mailing Address: Current Mailing Address:** 7205 NW 19 ST MIAMI, FL 33126 US FEI Number: 65-0879187 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROIZ, MARIO 7205 NW 19 ST #208 MIAMI, FL 33126 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ROIZ, MARIO ROIZ, MARIO Name: Name: 150 S.E. 25 ROAD, 8F 7301 SW 82 COURT Address: Address: City-St-Zip: MIAMI, FL 33129 US City-St-Zip: MIAMI, FL 33143 US

Title: Title: ST () Delete (X) Change () Addition

Name: ROIZ, VIVIAN Name: ROIZ, VIVIAN

836 MADRID ST. Address: 4925 COLLINS AVE, 6E Address: CORAL GABLES, FL 33134 MIAMI BEACH, FL 33140 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: MARIO ROIZ PD 04/21/2006