2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000056885

FILED Jan 07, 2005 Secretary of State

Entity Name: PROFESSIONAL BENEFITS & FINANCIAL SOLUTIONS, INC

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Current Principal Place of Business:			New Prince	New Principal Place of Business:			
PMB 247	STON ROAD FL 33326						
Current M	lailing Addres	ss:	New Maili	ng Addres	s:		
PMB 247	STON ROAD FL 33326						
El Number	: 65-0938808	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	Address of C	Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
2134 HOLI	TE, MATTHEW LYWOOD BOU OOD, FL 3302	/ J JLEVARD					
2134 HOLI HOLLYWO The above	LYWOOD BOUDOD, FL 3302 named entity see of Florida.	/J JLEVARD 0 US			ed office or registered agent, or bo		
2134 HOLI HOLLYWO The above n the State	LYWOOD BOUDOD, FL 3302 named entity: e of Florida.	/J JLEVARD 0 US	rpose of changing				
2134 HOLI HOLLYWC The above n the State BIGNATUR	LYWOOD BOUDOD, FL 3302 named entity: e of Florida. RE: Electror	/ J JLEVARD 0 US submits this statement for the pu	rpose of changing		ed office or registered agent, or bo		
2134 HOLI HOLLYWO The above n the State BIGNATUF	LYWOOD BOUDOD, FL 3302 named entity: e of Florida. RE: Electror	JULEVARD US Submits this statement for the punic Signature of Registered Agen Trust Fund Contribution ().	rpose of changing t	its registere	ed office or registered agent, or bo		
2134 HOLI HOLLYWO The above n the State BIGNATUF	e named entity: e of Florida. RE: Electror mpaign Financing	JULEVARD US Submits this statement for the punic Signature of Registered Agen Trust Fund Contribution (). TORS: Delete FREY S RT LANE	rpose of changing t	its registere IS/CHANG VPSD BRUNELL, 1120 WEEI	ed office or registered agent, or bo Date		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID R. BERNSTEIN PRES 01/07/2005