

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V44038

FILED
May 01, 2008
Secretary of State

Entity Name: APPLIED BENEFITS & CONCEPTS, INC.

Current Principal Place of Business:

300 S. PINE ISLAND ROAD
306
PLANTATION, FL 33324 US

Current Mailing Address:

300 S. PINE ISLAND ROAD
306
PLANTATION, FL 33324 US

New Principal Place of Business:

300 S. PINE ISLAND ROAD
264
PLANTATION, FL 33324 US

New Mailing Address:

300 S. PINE ISLAND ROAD
264
PLANTATION, FL 33324 US

FEI Number: 65-0340484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, FAITH
300 S. PINE ISLAND RD.
STE 306
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

ROBERTS, SHAWN
300 S. PINE ISLAND RD.
STE 264
PLANTATION, FL 33324 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: SHAWN ROBERTS

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,T () Delete
Name: ROBERTS, FAITH,
Address: 300 S. PINE ISLAND RD. #306
City-St-Zip: PLANTATION, FL 33324

Title: V, S (X) Delete
Name: BURNSTAD, JOY,
Address: 300 S. PINE ISLAND RD. #306
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBERTS, SHAWN,
Address: 300 S. PINE ISLAND RD. #264
City-St-Zip: PLANTATION, FL 33324

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHAWN ROBERTS

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date