

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000057964

Entity Name: QUALITY MEDICAL INFORMATION SERVICES, INC.

Current Principal Place of Business:

9420 BEAUCLERC OAKS DRIVE
JACKSONVILLE, FL 32257

Current Mailing Address:

9420 BEAUCLERC OAKS DRIVE
JACKSONVILLE, FL 32257

FEI Number: 04-3702133

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARLEY, DAVID SR CPA
5150 BELFORT RD
BLDG. 400
JACKSONVILLE, FL 32256 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

Officer/Director Detail :

Title P
Name AZCUY, DEBORAH M
Address 9420 BEAUCLERC OAKS DRIVE
City-State-Zip: JACKSONVILLE FL 32257

Title ST
Name AZCUY, CHRISTOPHER V
Address 9420 BEAUCLERC OAKS DR
City-State-Zip: JACKSONVILLE FL 32257

I hereby 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 all other like empowered.

SIGNATURE: DEBORAH MARIE AZCUY

PRESIDENT

03/28/2016

Electronic Signature of Signing Officer/Director Detail

Date