# SIGNATURE: MAYRA TORRES

Electronic Signature of Signing Officer/Director Detail

## 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000022130

Entity Name: J & A MEDICAL BILLING, INC.

## Current Principal Place of Business:

4155 SW 130 AVE., SUITE 107 MIAMI, FL 33175

## **Current Mailing Address:**

4155 SW 130 AVE., SUITE 107 MIAMI, FL 33175 US

#### FEI Number: 20-0688753

#### Name and Address of Current Registered Agent:

TORRES, MAYRA C 4155 SW 130 AVE SUITE 107 MIAMI, FL 33175 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

#### **Officer/Director Detail :**

| Title           | DIR                            | Title           | SECRETARY                      |
|-----------------|--------------------------------|-----------------|--------------------------------|
| Name            | TORRES, MAYRA C                | Name            | TORRES, JOSE LUIS JR.          |
| Address         | 4155 SW 130 AVE.,<br>SUITE 107 | Address         | 4155 SW 130 AVE.,<br>SUITE 107 |
| City-State-Zip: | MIAMI FL 33175                 | City-State-Zip: | MIAMI FL 33175                 |

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.

PRESIDENT

## FILED Mar 28, 2023 Secretary of State 4376661709CC

Certificate of Status Desired: No

03/28/2023

Date

Date