# Entity Name: PHYSICIANS BILLING & COLLECTION NETWORK, INC.

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

4580 SW 8TH STREET CORAL GABLES, FL 33134

### **Current Mailing Address:**

4580 SW 8TH STREET CORAL GABLES, FL 33134

DOCUMENT# P99000050974

## FEI Number: 65-0926872

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

DE LA PENA, ALINA C 4580 SW 8TH STREET CORAL GABLES, FL 33134 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	Р	Title	SDT
Name	DE LA PENA, ALINA C	Name	DE LA PENA, ALINA C
Address	4580 SW 8 ST	Address	4580 SW 8 ST
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134
Title	D		
Name	DE LA PENA, ENRIQUE R		
Address	4580 SW 8TH STREET		
City-State-Zip:	CORAL GABLES FL 33134		

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: ALINA C. DE LA PENA

PRESIDENT

02/02/2013 Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date