2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2010
Secretary of State

DOCUMENT# F04000006125

Entity Name: HEALTH REVENUE ASSURANCE ASSOCIATES, INC.

Current Principal Place of Business:

10097 CLEARY BOULEVARD
SUITE 513
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

10097 CLEARY BOULEVARD
SUITE 513
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 52-2322643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUBINOWITZ, ROBERT
10097 CLEARY BOULEVARD
SUITE 513
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PC
Name: CLARK, ANDREA
Address: 10097 CLEARY BOULEVARD
City-St-Zip: PLANTATION, FL 33324

Title: DST
Name: RUBINOWITZ, ROBERT
Address: 10097 CLEARY BOULEVARD
City-St-Zip: PLANTATION, FL 33324

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: ROBERT RUBINOWITZ DST 03/26/2010

Electronic Signature of Signing Officer or Director — Date