2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H20290

FILED
Mar 19, 2012
Secretary of State

Entity Name: MEDICAL OFFICE SOFTWARE, INC.

Current Principal Place of Business:

790 E. BROWARD BLVD
SUITE 400
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

6400 N ANDREWS AVE
SUITE 530
FORT LAUDERDALE, FL 33309 US

Current Mailing Address:

790 E. BROWARD BLVD
SUITE 400
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

6400 N ANDREWS AVE
SUITE 530
FORT LAUDERDALE, FL 33309 US

FEI Number: 59-2450103 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENNEDY, EUGENE M
517 SW FIRST AVENUE
FT. LAUDERDALE, FL 33301 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: LONGSTREET, CAROLYN
Address: 1663 NE 171ST STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: VP
Name: DISHUEME, EDDY
Address: 3428 NORTHLAND DR
City-St-Zip: HAMILTON, OH 45011

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: CAROLYN LONGSTREET PRES 03/19/2012

Electronic Signature of Signing Officer or Director Date