

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J69497

FILED
Jan 12, 2009
Secretary of State

Entity Name: MEDICAL BILLING SPECIALIST, INC.

Current Principal Place of Business:

C/O MARILYN KITMAN
321 E ROBERTSON ST
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

C/O MARILYN KITMAN
321 E ROBERTSON ST
BRANDON, FL 33511

New Mailing Address:

FEI Number: 59-2809283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KITMAN, MARILYN
321 E. ROBERTSON STREET
BRANDON, FL 33511 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: D () Delete
Name: KITMAN, MARILYN,
Address: 321 E. ROBERTSON STREET
City-St-Zip: BRANDON, FL

Title: D () Delete
Name: REYNOLDS, RACHEL
Address: 1836 S VALRICO RD
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: REYNOLDS, RACHEL
Address: 15547 MARTIN MEADOW DR
City-St-Zip: LITHIA, FL 33547

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARILYN KITMAN

D

01/12/2009

Electronic Signature of Signing Officer or Director

Date