2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 02, 2006 8:00 am Secretary of State **DOCUMENT # L00878** 1. Entity Name 05-02-2006 90419 022 ***150 00 ACCUMED TRANSCRIBING SERVICES CORPORATION Principal Place of Business Mailing Address 8100 SW 81 DRIVE 8100 SW 81 DRIVE tí. #210 #210 MIAMI, FL 33143 MIAMI, FL 33143 02162006 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0125231 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HECHTMAN, BARRY I DO NOT WRITE 8100 SW 81 SR #210 MIAMI, FL 33143 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Si. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ΡD ŧΝ HECHTMAN, BARRY I STREET ADDRESS 8100 SW 81 DR #210 MIAMI, FL 33143 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

Davtime Phone #