2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L10787

FILED Apr 27, 2012 Secretary of State

Entity Name: MEDICAL RECEIVABLE RECOVERY SPECIALISTS, INC.

New Principal Place of Business: Current Principal Place of Business: 4696 NW 103RD AVENUE SUNRISE, FL 33351 **Current Mailing Address: New Mailing Address:** 4696 NW 103RD AVENUE SUNRISE, FL 33351 FEI Number: 65-0173255 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRUNETTO, THERESA 4696 NW 103RD AVENUE SUNRISE, FL 33351 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: PE

Name: BRUNETTO, THERESA
Address: 4696 NW 103RD AVENUE
City-St-Zip: SUNRISE, FL 33351

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: THERESA BRUNETTO PD 04/27/2012