

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041729

**FILED**  
**Apr 30, 2006**  
**Secretary of State**

**Entity Name:** BILLING SERVICES PLUS, INC.

**Current Principal Place of Business:**

3891 NW 165TH ST  
MIAMI, FL 33054

**New Principal Place of Business:**

701 N.W. 210TH STREET  
BLDG. #3-502  
MIAMI, FL 33169

**Current Mailing Address:**

3891 NW 165TH ST  
MIAMI, FL 33054

**New Mailing Address:**

701 N.W. 210TH STREET  
BLDG. #3-502  
MIAMI, FL 33169

**FEI Number:** 65-1003819

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MADISON, VALICIA J  
3891 NW 165TH ST  
MIAMI, FL 33054 US

**Name and Address of New Registered Agent:**

MADISON, VALICIA J  
701 N.W. 210TH STREET, BLDG. #3-502  
MIAMI, FL 33169 US

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

04/30/2006

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MADISON, VALICIA J  
Address: 3891 NW 165TH ST  
City-St-Zip: MIAMI, FL 33054

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MADISON, VALICIA J  
Address: 701 N.W. 210TH STREET, BLDG. #3-502  
City-St-Zip: MIAMI, FL 33169

I hereby certify that the information supplied with this filing does not qualify for the 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: VALICIA J. MADISON

D

04/30/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date