2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000111575

MIAMI, FL 33125

City-St-Zip:

Entity Name: BEST QUALITY BILLING SERVICES, INC.

FILED May 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7105 N.W. 53 TERR 1902 NW 26AVE MIAMI, FL 33166 MIAMI, FL 33125 **Current Mailing Address: New Mailing Address:** 7105 N.W. 53 TERR 1902 NW 26AVE MIAMI, FL 33166 MIAMI, FL 33125 FEI Number: 65-1059929 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: CASTILLO, ANIELKA M 1902 NW 26TH AVENUE MIAMI, FL 33125 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CASTILLO, ANIELKA M Name: Name: 1902 N.W. 26TH AVE. Address: Address: City-St-Zip: MIAMI, FL 33125 City-St-Zip: Title: VD Title: () Change () Addition () Delete CASTILLO, DORA E Name: Name: 1902 NW 26 AVE Address: Address:

City-St-Zip:

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: ANIELKA M CASTILLO PD 05/27/2008