2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000111586

Entity Name: M & F MEDICAL BILLING TECHNOLOGY, INC.

FILED Nov 14, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

175 FOUNTAINEBLEAU BLVD 8445 SW 40 STREET SUITE 2D1 MIAMI, FL 33155 MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

175 FOUNTAINEBLEAU BLVD 8445 SW 40 STREET SUITE 2D1 MIAMI, FL 33155 MIAMI, FL 33172

FEI Number: 65-1060190 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:

FERNANDEZ, MARIA 711 N.W. 23RD AVENUE SUITE 205 MIAMI, FL 33125 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: MARIA FERNANDEZ

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:

Title: D () Delete Title: DPS (X) Change () Addition

 Name:
 FERNANDEZ, MARIA
 Name:
 ARMENTEROS, MARIA

 Address:
 711 N.W. 23RD AVENUE SUITE 205
 Address:
 8445 SW 40 STREET

 City-St-Zip:
 MIAMI, FL 33125
 City-St-Zip:
 MIAMI, FL 33155

Title: DPS (X) Delete Title: () Change () Addition

 Name:
 ARMENTEROS, MARIA
 Name:

 Address:
 123 ZAMORA AVE. APT #103
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIA ARMENTEROS P 11/14/2005