

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000059740

FILED  
Apr 19, 2002 8:00 AM  
Secretary of State

Entity Name: MEDICAL BILLING UNLIMITED INC.

## Current Principal Place of Business:

112 DAVID ST. #B  
FT WALTON BEACH, FL 32547

## New Principal Place of Business:

8667 9TH AVENUE CT.  
PENSACOLA, FL 32514

## Current Mailing Address:

112 DAVID ST. #B  
FT WALTON BEACH, FL 32547

## New Mailing Address:

8667 9TH AVENUE CT.  
PENSACOLA, FL 32514

FEI Number: 59-3726731

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CUADRAS, RICHARD  
112 DAVID ST. #B  
FT WALTON BEACH, FL 32547

## Name and Address of New Registered Agent:

CUADRAS, RICHARD  
8667 9TH AVENUE CT.  
PENSACOLA, FL 32514

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: \_\_\_\_\_

04/19/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: CUADRAS, RICHARD  
Address: 112 DAVID ST. #B  
City-St-Zip: FT WALTON BEACH, FL 32547

Title: VPD ( ) Delete  
Name: JAY, ANGELA  
Address: 112 DAVID ST. #B  
City-St-Zip: FT WALTON BEACH, FL 32547

Title: SD ( ) Delete  
Name: JAY, LACEY  
Address: 112 DAVID ST. #B  
City-St-Zip: FT WALTON BEACH, FL 32547

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: CUADRAS, RICHARD  
Address: 8667 9TH AVENUE CT.  
City-St-Zip: PENSACOLA, FL 32514

Title: VPD (X) Change ( ) Addition  
Name: CUADRAS, ANGELA  
Address: 8667 9TH AVENUE CT.  
City-St-Zip: PENSACOLA, FL 32514

Title: SD (X) Change ( ) Addition  
Name: JAY, LACEY  
Address: 8667 9TH AVENUE CT.  
City-St-Zip: PENSACOLA, FL 32514

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: RICHARD CUADRAS

PTD

04/19/2002

Electronic Signature of Signing Officer or Director

Date