

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 15, 2011
Secretary of State

Entity Name: HEALTHCARE PHYSICIAN BILLING SERVICES, INC.

Current Principal Place of Business:

5590 E 20TH AVENUE
STE 203
HIALEAH, FL 33016 US

New Principal Place of Business:

5590 W 20TH AVENUE
STE 203
HIALEAH, FL 33016 US

Current Mailing Address:

3392 S.W. 175 AVE
MIRAMAR, FL 33029 US

New Mailing Address:

5590 W 20TH AVENUE
STE 203
HIALEAH, FL 33016 US

FEI Number: 65-1150764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, JUAN J
3392 S.W. 175TH AVE
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

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: PD
Name: GARCIA, JUAN J
Address: 3392 S.W. 175TH AVE
City-St-Zip: MIRAMAR, FL 33029

Title: PD
Name: GARCIA, DELARAY S
Address: 3392 S.W. 175TH AVE
City-St-Zip: MIRAMAR, FL 33029

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: JUAN J GARCIA

PRES

04/15/2011

Electronic Signature of Signing Officer or Director

Date