2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021103

Entity Name: PROVIDER ASSIST BILLING SERVICES, INC.

FILED Apr 26, 2007 Secretary of State

Current I	Principal Plac	e of Business:	New Principal Pla	New Principal Place of Business:	
4925 SW 94TH AVE. MIAMI, FL 43165			12002 SW 128 CT MIAMI, FL 33186	12002 SW 128 CT SUITE 205 MIAMI, FL 33186	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
4925 SW 94TH AVE. MIAMI, FL 43165			12002 SW 128 CT MIAMI, FL 33186	12002 SW 128 CT SUITE 205 MIAMI, FL 33186	
FEI Numbe	r: 02-0560657	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
4925 SW	S, MABIET 94TH AVE. _ 43165 US	ş-			
	e named entity te of Florida.	submits this statement for the p	ourpose of changing its regist	ered office or registered agent, or both,	
SIGNATL	JRE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	ampaign Financir	ng Trust Fund Contribution ().			
OFFICER	RS AND DIREC	CTORS:	ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	D (VILLEGAS, M) Delete ABIET	Title: Name:	() Change () Addition	

Address: 4925 SW 94TH AVE. Address: City-St-Zip: MIAMI, FL 43165 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: MABIET VILLEGAS D 04/26/2007