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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Jul 17, 2003 8:00 am **Secretary of State** P02000035916 DOCUMENT # 07-17-2003 90027 007 ***158.75 1. Entity Name UNIQUE BILLING ASSOC., INC. Principal Place of Business Mailing Address POST OFFICE BOX 20166 3673 STOKES DRIVE SARASOTA FL 34232 SARASOTA FL 34276 uite, Apt. #, etc Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For Not Applicable \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR **MIAMI FL 33145** City Zip Code 8.-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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE Change ☐ Addition TITLE NAME WASHINGTON, OSCAR L NAME 3673 STOKES DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34232 CITY-ST-ZIP Delete ☐ Addition TITLE TITLE Change WASHINGTON, RAMONA L NAME NAME STREET ADDRESS 3673 STOKES DRIVE STREET ADDRESS CITY:ST-ZIP SARASOTA FL 34232 CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11

changed, or on an atta

Unique Medical Billing Po Box 20166 • Some

PH: 941-379-0203 • Fax 941-379-8856 Email: uniquebillingassoc@comcast.net www.uniquebillingassoc.com

July 14, 2003

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

To whom this may concern,

As Vice President of Unique Billing Assoc, Inc, I am hereby stating that the 2003 Uniform Business Report did not arrive to our Mailing Address until July 09, 2003.

As Vice President, I am the only one that is authorized to pick up mail at our mailing address. I am completing the form I recently received as requested and attaching a check for the amount of \$150.00

Please accept this letter and check as full payment. Since we are a new corporation, we will be more alert to making sure we receive this report on time.

Ramona L. Washington (VP & Billing Manager)

Oscar L. Washington

(President)

"PROFESSIONAL **MEDICAL BILLING AND** OFFICE MANAGEMENT"

OTHER SERVICES:

(Medical Billing) (Office Management) (Compliance Program) (Medical Records Service) (Authorization) (Employment Screening) (Office Cleaning)

Ramona Washington.

(Vice President)

Sincerely.