2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P02000040592 DOCUMENT



FILED Jan 23, 2003 8:00 am Secretary of State 01-23-2003 90208 050 ***150.00

MD CODING SOLUTIONS, INC.			01-23-2003 902	08 030 ****130.00
Principal Place of Business 9200 FONTAINBLEAU BLVD. #104 MIAMI FL 33172	Mailing Address 9200 FONTAINBLEAU BL MIAMI FL 33172	VD. #104		1/1/ 44/1/ 6/8/1/ 8/8/1/ 8/1/ 8/1/ 8/1/ 8/1/ 8/
2. Principal Place of Business 8815 SW 151 CT	3. Mailing Address S VI) 151 cT		
Suite. Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF I	MAKING CHANGES
Cip & State NIAMI FL	City & State McAMi	FL	4. FEI Number 03 - 044451/	Applied For Not Applicable
33196 Country DADE	33196	Country	<u> </u>	\$8.75 Additional Fee Required
6. Name and Address of Current R	Registered Agent		7. Name and Address of New Regi	stered Agent
NOYA, PEDRO		Name No	YA, VEDRO	
9200 FONTAINBLEAU BLVD. #104		Street Address	s (P.O. Box Number is Not Acceptable)	
MIAMI FL 33172		8813	5 SW_151_CT_	
	A	City Nu	AMI	FL 253196
8. The above named entity submits this statement for the obligations of registered agent.	the purpose of changing it	s registered office or regis	tered agent, or both, in the State of Florida	a. I am familiar with, and accept
the obligations of registered agent.	(SO). PED.	(O) Dorla	A 1	119/03
SIGNATURE Signature, typed or printed name of registered agent an	1 V.S.	TE: Registered Agent signature requi	red when reinstating)	DATE
FILE NOW IU FEE IS \$150.00			9 Election Campaign Finance	sing- \$5.00 May Be
After May 1,2003 Fee will be \$550.00 Make Check Payable to Florida Department of	State		Trust Fund Contribution.	Added to Fees
10. OFFICERS AND D		11.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 11
NAME NOYA, PEDRO	☐ Delete	TITLE PD	VA PEDRO ·	Change
STREET ADDRESS 9200 FONTAINBLEAU BLVD. #104	ł	STREET ADDRESS 97 8	15 500 151 01	
CITY-ST-ZIP MIAMI FL 33172		CITY-ST-ZIP	lIANI PL 33194	
NAME VD DE CARDENAS, PEGGY	☐ Delete	TITLE VL NAME DE	CANDENAS, PEGGY 815 SW 151CT VIAMI FL 23196	Change
STREET ADDRESS 9200 FONTAINBLEAU BLVD. #104	-	STREET ADDRESS 82	815 SW 151CT	
CITY-ST-ZIP MIAMI FL 33172	Delete	CITY-ST-ZIP	VIAMI IN DOLLA	☐ Change ☐ Addition
NAME	Delete	NAME		C Shango Mandon
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP		
TITLE	☐ Delete	TITLE		☐ Change ☐ Addition
NAME -		NAME ATREET ARRESTO	_	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	^	'.
TITLE	☐ Delete	TITLE	·	☐ Change ☐ Addition
NAME STREET ADDRESS		NAME STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
TITLE	☐ Delete	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS		NAME STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
12. I hereby certify that the information supplied with t indicated on this report or supplemental report is of the corporation or the receiver or trustee emoor changed, or on an attachment with an apprecia, with	rue and accurate and that wered to execute this repor	my signature shall have the t as required by Chapter 6	Section 119.07(3)(i), Florida Statutes. I fur e same legal effect as if made under oath 07, Florida Statutes; and that my name ap	ther certify that the information that I am an officer or director opears in Block 10 or Block 11 if
SIGNATURE:SIG	A) E PLENY	AED OYA	01/19/03	305-559-0473