2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000001689

FILED
Jan 17, 2011
Secretary of State

Entity Name: MONTESINOS MEDICAL TRANSCRIPTION SERVICE, INC.

Current Principal Place of Business:

10951 SW 93 CT.
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

8567 CORAL WAY
STE 336
MIAMI, FL 33155

New Mailing Address:

FEI Number: 06-1667698 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MONTESINOS, MARIA PRES
10951 SW 93 CT.
MIAMI, FL 33176 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:	MONTESINOS, MARIA
Address:	10951 SW 93 CT.
City-St-Zip:	MIAMI, FL 33176

Title:	VD
Name:	MONTESINOS, JOSE I
Address:	10951 SW 93 CT.
City-St-Zip:	MIAMI, FL 33176

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: MARIA MONTESINOS PRES 01/17/2011
Electronic Signature of Signing Officer or Director Date