

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021806

FILED
Apr 27, 2005
Secretary of State

Entity Name: ARK MEDICAL BILLING ASSOCIATES, INC.

Current Principal Place of Business:

255 S.E. 14TH ST., STE. #1B
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

2601 DAVIE BLVD
FT. LAUDERDALE, FL 33312

Current Mailing Address:

255 S.E. 14TH ST., STE. #1B
FT. LAUDERDALE, FL 33316

New Mailing Address:

2601 DAVIE BLVD
FT. LAUDERDALE, FL 33312

FEI Number: 56-2331241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DR. () Delete
Name: YDROVO, GLENDA
Address: 1625 SE 3RD AVE., #1B
City-St-Zip: FORT LAUDERDALE, FL 33316 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: YDROVO, GLENDA
Address: 2601 DAVIE BLVD
City-St-Zip: FORT LAUDERDALE, FL 33312 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GLENDA YDROVO

DR

04/27/2005

Electronic Signature of Signing Officer or Director

Date