

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000081026

FILED
Jan 24, 2006
Secretary of State

Entity Name: MEDICAL BILLING SOLUTIONS & MANAGEMENT, INC.

Current Principal Place of Business:

8001 NW 84 TER
TAMARAC, FL 33321

New Principal Place of Business:

808 SW 2ND STREET
FT LAUDERDALE, FL 33312

Current Mailing Address:

8001 NW 84 TER
TAMARAC, FL 33321

New Mailing Address:

808 SW 2ND STREET
FT LAUDERDALE, FL 33312

FEI Number: 90-0108219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARON, RICHARD ESQ.
501 NE 1 AVE STE 201
MIAMI, FL 33132 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: RICHARD BARON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HABERMANN, FAY
Address: 2250 NW 78 AVE #102
City-St-Zip: PEMBROKE PINES, FL 33024

Title: DV (X) Delete
Name: BUCHBINDER, MONIQUE
Address: 8001 NW 84 TER
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBINSON, MARJORIE DR
Address: 808 SW 2ND STREET
City-St-Zip: FT LAUDERDALE, FL 33312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARJORIE ROBINSON

P

01/24/2006

Electronic Signature of Signing Officer or Director

Date