

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000114646

FILED  
Sep 20, 2006  
Secretary of State

Entity Name: PHYSICIAN BILLING SERVICES, INC

## Current Principal Place of Business:

258 S E 6TH AVENUE  
# 9 & 15  
DELRAY BEACH, FL 33483 US

## New Principal Place of Business:

## Current Mailing Address:

211 S FEDERAL HWY  
STE 7 & 8  
BOYNTON BEACH, FL 33435 US

## New Mailing Address:

258 S E 6TH AVENUE #9  
DELRAY BEACH, FL 33483 US

FEI Number: 33-1098425

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DANA K. THOMPSON  
258 S E 6TH AVENUE  
DELRAY BEACH, FL 33483 US

## Name and Address of New Registered Agent:

DANA K. THOMPSON C/O ALAN RAMER, ESQ  
1390 S DIXIE HWY #1301  
CORAL GABLES, FL 33146 US

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: DANA K. THOMPSON

09/20/2006

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: PRES ( ) Delete  
Name: THOMPSON, DANA K  
Address: 12665 TIMBER RIDGE CIRCLE  
City-St-Zip: WELLINGTON, FL 33414

Title: VP ( ) Delete  
Name: BYRNES, JAMES J  
Address: 237 GEORGE BUSH BLVD  
City-St-Zip: DELRAY BEACH, FL 33444

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DANA K. THOMPSON

PRES

09/20/2006

Electronic Signature of Signing Officer or Director

Date