

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000029596

FILED
Apr 06, 2012
Secretary of State

Entity Name: PHYSICIANS REIMBURSEMENT SOLUTION INC

Current Principal Place of Business:

14058 SW 274 TERR.
HOMESTEAD, FL 33032

New Principal Place of Business:

15265 SW 88TH TER
MIAMI, FL 33196

Current Mailing Address:

14058 SW 274 TERR.
HOMESTEAD, FL 33032

New Mailing Address:

15265 SW 88TH TER
MIAMI, FL 33196

FEI Number: 04-3807321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, YESSSENIA A
14058 SW 274 TERR.
HOMESTEAD, FL 33032 US

Name and Address of New Registered Agent:

RAMIREZ, YESSSENIA A
15265 SW 88TH TER
MIAMI, FL 33196 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:

Electronic Signature of Registered Agent

04/06/2012

Date

OFFICERS AND DIRECTORS:

Title: P
Name: RAMIREZ, YESSSENIA A
Address: 15265 SW 88TH TER
City-St-Zip: MIAMI, FL 33196

Title: VP
Name: RAMIREZ, MANUEL A
Address: 15265 SW 88TH TER
City-St-Zip: MIAMI, FL 33196

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: YESSSENIA RAMIREZ

P

04/06/2012

Electronic Signature of Signing Officer or Director

Date