

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146749

FILED
Mar 01, 2008
Secretary of State

Entity Name: MECA MEDICAL BILLING AND CODING SPECIALIST, INC

Current Principal Place of Business:

4680 WEST 13 LANE
#225
HIALEAH, FL 33012

New Principal Place of Business:

5425 WEST 24 AVENUE
#44
HIALEAH, FL 33016

Current Mailing Address:

4680 WEST 13 LANE
#225
HIALEAH, FL 33012

New Mailing Address:

5425 WEST 24 AVENUE
#44
HIALEAH, FL 33016

FEI Number: 14-1941865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILHETS, MONICA
4680 WEST 13 LANE
#225
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

MILHETS, MONICA
5425 WEST 24 AVENUE
#44
HIALEAH, FL 33016 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: MONICA MILHETS

03/01/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILHETS, MONICA
Address: 4680 WEST 13 LANE, #225
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MILHETS, MONICA
Address: 5425 WEST 24 AVENUE, #44
City-St-Zip: HIALEAH, FL 330126

I hereby certify that the information supplied with this filing does not qualify 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: MONICA MILHETS

OWNE

03/01/2008

Electronic Signature of Signing Officer or Director

Date