2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020128

Entity Name: BILLING CENTER OF FLORIDA INC

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1490 WEST 49 PLACE 9720 SW 142 PL SUITE 340 MIAMI, FL 33186 HIALEAH, FL 33012

Current Mailing Address: New Mailing Address:

1490 WEST 49 PLACE 9720 SW 142 PL SUITE 340 MIAMI, FL 33186 HIALEAH, FL 33012

FEI Number: 20-4308253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 MARTINEZ, TANIA
 VALDIVIESO, HIPOLITO E

 13831 SW 28 ST
 9720 SW 142 PL

 MIAMI, FL 33175 US
 MIAMI, FL 33186 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: HIPOLITO E VALDIVIESO 04/10/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: VALDIVIESO, HIPOLITO Name: VALDIVIESO, HIPOLITO

 Name:
 VALDIVIESO, HIPOLITO
 Name:
 VALDIVIESO, HIPO

 Address:
 1490 WEST 49 PLACE
 Address:
 9720 SW 142 PL

 City-St-Zip:
 HIALEAH, FL 33012
 City-St-Zip:
 MIAMI, FL 33186

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: HIPOLITO VALDIVIESO P 04/10/2009