

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000021476

Entity Name: JAX MEDICAL BILLING, INC.

FILED
Apr 28, 2011
Secretary of State

Current Principal Place of Business:

326 SOUTHERN ROSE DR
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

PO BOX 54576
JACKSONVILLE, FL 32245

New Mailing Address:

FEI Number: 20-4315438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LU, WENDY
326 SOUTHERN ROSE DR
JACKSONVILLE, FL 32225 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D,P
Name: LU, WENDY
Address: 326 SOUTHERN ROSE DR
City-St-Zip: JACKSONVILLE, FL 32225

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: WENDY LU

PRES

04/28/2011

Electronic Signature of Signing Officer or Director

Date