

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000079186

Entity Name: AM BILLING RESOURCES, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

2943 SW 144 PLACE  
MIAMI, FL 33175

## New Principal Place of Business:

## Current Mailing Address:

2943 SW 144 PLACE  
MIAMI, FL 33175

## New Mailing Address:

FEI Number: 20-5012151

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BETANCOURT, ROSA  
2943 SW 144 PLACE  
MIAMI, FL 33175 US

## Name and Address of New Registered Agent:

ALONSO, DAVID  
2943 SW 144 PLACE  
MIAMI, FL 33175 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: DAVID ALONSO

05/01/2009

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: PSD ( ) Delete  
Name: BETANCOURT, ROSA  
Address: 2943 SW 144 PLACE  
City-St-Zip: MIAMI, FL 33175

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ALONSO, DAVID  
Address: 2943 SW 144 PLACE  
City-St-Zip: MIAMI, FL 33175

Title: S ( ) Change (X) Addition  
Name: BETANCOURT, ROSA  
Address: 2943 SW 144 PLACE  
City-St-Zip: MIAMI, FL 33175

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: DAVID ALONSO

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date