

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000086862

**FILED
Jan 23, 2009
Secretary of State**

Entity Name: NI BILLING SERVICES INC.

Current Principal Place of Business:

14331 SW 120 ST
SUITE 209
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

1431 SW 120 ST
SUITE 209
MIAMI, FL 33186

New Mailing Address:

14331 SW 120 ST
SUITE 209
MIAMI, FL 33186

FEI Number: 20-8227810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISMAEL, NADIA
14331 SW 120 ST
SUITE 209
MIAMI, FL 33186 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ISMAEL, NADIA
Address: 15051 SW 146 ST
City-St-Zip: MIAMI, FL 33196

Title: P () Delete
Name: N.I.BILLING SERVICE,
Address: 14331 SW 120 ST SUITE 209
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NADIA ISMAEL

P

01/23/2009

Electronic Signature of Signing Officer or Director

_____ Date