

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000149069

FILED  
Apr 17, 2008  
Secretary of State

Entity Name: THE BETTER BILLING SERVICES,CORP

## Current Principal Place of Business:

2300 NW 94 AVE  
SUITE 200  
DORAL, FL 33172 US

## New Principal Place of Business:

16163 SW 143 LN  
MIAMI, FL 33196 US

## Current Mailing Address:

2300 NW 94 AVE  
SUITE 200  
DORAL, FL 33172 US

## New Mailing Address:

16163 SW 143 LN  
MIAMI, FL 33196 US

FEI Number: 20-5980219

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JIMENEZ, MIGUEL  
2300 NW 94 AVE  
SUITE 200  
DORAL, FL 33172 US

## Name and Address of New Registered Agent:

JIMENEZ, MIGUEL  
16163 SW 143 LN  
MIAMI, FL 33196 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:

04/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: JIMENEZ, MIGUEL  
Address: 2300 NW 94 AVE SUITE 200  
City-St-Zip: DORAL, FL 33172 US

Title: VP ( ) Delete  
Name: SANCHEZ, MARINA  
Address: 211 NW 72 AVE APT. 304  
City-St-Zip: MIAMI, FL 33126 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: JIMENEZ, MIGUEL  
Address: 16163 SW 143 LN  
City-St-Zip: MIAMI, FL 33196 US

Title: VP (X) Change ( ) Addition  
Name: SANCHEZ, MARINA  
Address: 16163 SW 143 LN  
City-St-Zip: MIAMI, FL 33196 US

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: MIGUEL JIMENEZ

P

04/17/2008

Electronic Signature of Signing Officer or Director

Date