

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000016798

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** P & L FLORIDA BILLING SERVICE, INC.

**Current Principal Place of Business:**

2020 NW 190TH AVE  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

2020 NW 190TH AVE  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

**FEI Number:** 20-8422099

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAMBARTE, ALTER  
17021 NORTH BAY ROAD  
516  
SUNNY ISLES, FL 33160 US

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

GAMBARTE, ALTER  
17021 NORTH BAY ROAD  
924  
SUNNY ISLES, FL 33160 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: ALTER GAMBARTE

04/28/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GAMBARTE, LUBIAM  
Address: 2020 NW 190TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33029

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: LUBIAM GAMBARTE

D

04/28/2010

Electronic Signature of Signing Officer or Director

Date