

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 12, 2011
Secretary of State

Entity Name: MEDICAL BILLING SOLUTIONS OF SOUTH FLORIDA, INC

Current Principal Place of Business:

9818 SARATOGA PARK CIRCLE
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

9818 SARATOGA PARK CIRCLE
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 26-0412243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOMTOB, NADINE
9818 SARATOGA PARK CIRCLE
BOCA RATON, FL 33428 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: P
Name: YOMTOB, NADINE
Address: 9818 SARATOGA PARK CIRCLE
City-St-Zip: BOCA RATON, FL 33428

Title: P
Name: YOMTOB, NADINE
Address: 9818 SARATOGA PARK CIRCLE
City-St-Zip: BOCA RATON, FL 33428

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: NADINE YOMTOB

MS.

04/12/2011

Electronic Signature of Signing Officer or Director

Date