2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000096124

DEAM, DAVID J

SPRING HILL, FL 34606 FL

8412 DAY ST.

Name:

Address:

City-St-Zip:

Entity Name: BILLINGTIPS.INC

FILED Feb 16, 2008 Secretary of State

Littly Name: Billing 1173, INC					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
8412 DAY SPRING H	ST. ILL, FL 34606	US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
8412 DAY SPRING H	ST. ILL, FL 34606	US			
FEI Number:	26-0817205	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS BLVD SUITE A-100 TAMPA, FL 336123425 US			13339 CORTEZ BLVD.	CORNETT, PATRICIA A 13339 CORTEZ BLVD. BROOKSVILLE, FL 34613 US	
The above in the State		ubmits this statement for the po	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: PATRICIA A. CORNETT				02/16/2008	
	Electroni	c Signature of Registered Age	nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () I GONZALEZ, ABI 8412 DAY ST. SPRING HILL, F		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	TRES () I DEAM, DAVID J 8412 DAY ST. SPRING HILL, F	Delete L 34606 US	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	SECT () DEAM, DAVID J 8412 DAY ST. SPRING HILL, F	Delete L 34606 US	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	DIR () I GONZALEZ, ABI 8412 DAY ST. SPRING HILL, F		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title:	DIR ()	Delete	Title: () Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ABIGAEL G. GONZALEZ PRES 02/16/2008