

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000036845

FILED
May 04, 2010
Secretary of State

Entity Name: COMPLETE MEDICAL BILLING & COLLECTION CORP.

Current Principal Place of Business:

23822 SW 107 CT.
HOMESTEAD, FL 33032

New Principal Place of Business:

20930 SW 87 AVE
STE 201
MIAMI, FL 33189

Current Mailing Address:

23822 SW 107 CT.
HOMESTEAD, FL 33032

New Mailing Address:

20930 SW 87 AVE
STE 201
MIAMI, FL 33189

FEI Number: 26-2372982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFONSO, TAIMY
23822 SW 107 CT
HOMESTEAD, FL 33032 US

Name and Address of New Registered Agent:

ALFONSO, TAIMY
20930 SW 87 AVE
STE 201
MIAMI, FL 33189 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: TAIMY ALFONSO

05/04/2010

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: ALFONSO, TAIMY
Address: 20930 SW 87 AVE 201
City-St-Zip: MIAMI, FL 33189

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: TAIMY ALFONSO

P

05/04/2010

Electronic Signature of Signing Officer or Director

Date