

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000093809

FILED
Jan 06, 2011
Secretary of State

Entity Name: BILLING AND ADMINISTRATIVE SERVICES, INC.

Current Principal Place of Business:

2699 LEE RD.
SUITE 510
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

2699 LEE RD.
SUITE 510
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 26-3555080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAKIM, JAMAL A MD
2699 LEE ROAD
SUITE 510
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

HAKIM, JAMAL A MD
2699 LEE ROAD
SUITE 510
WINTER PARK, FL 32789 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: JAMAL A HAKIM, MD

01/06/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: HAKIM, JAMAL A MD
Address: 2699 LEE ROAD, SUITE 510
City-St-Zip: WINTER PARK, FL 32789

Title: SEC
Name: SIDER, DEAN MD
Address: 2699 LEE ROAD, SUITE 510
City-St-Zip: WINTER PARK, FL 32789

Title: TR
Name: OEPEN, ROBERT C
Address: 2699 LEE ROAD, SUITE 510
City-St-Zip: WINTER PARK, FL 32789

Title: D
Name: KWA, AMDRE M MD
Address: 2699 LEE ROAD, SUITE 510
City-St-Zip: WINTER PARK, FL 32789

Title: D
Name: LAWRENCE, JAMES S JR.
Address: 2699 LEE ROAD, SUITE 510
City-St-Zip: WINTER PARK, FL 32789

Title: D
Name: MILLER, DOUGLAS T MD
Address: 2699 LEE ROAD, SUITE 510
City-St-Zip: WINTER PARK, FL 32789

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: JAMAL A HAKIM, MD

PD

01/06/2011

Electronic Signature of Signing Officer or Director

Date