

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000085667

Entity Name: MED-BILLING CHOICE INC

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

14515 SW 152 TERRACE  
MIAMI, FL 33177

**New Principal Place of Business:**

17400 SW 97TH AVE  
SUITE 131  
MIAMI, FL 33157

**Current Mailing Address:**

14515 SW 152 TERRACE  
MIAMI, FL 33177

**New Mailing Address:**

FEI Number: 27-0343032      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RODRIGUEZ, KETTY  
14515 SW 152 TERRACE  
MIAMI, FL 33177      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: RODRIGUEZ, KETTY  
Address: 14515 SW 152 TERRACE  
City-St-Zip: MIAMI, FL 33177

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: KETTY RODRIGUEZ

P

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date