FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

1		JAL REPORT 1998			Secretary of State							
[] 1.	Corporation		P93000 BILLING, INC.	068695	(4)			(1881/84) (18 1818)	allı si nl si nl sa llı sa llı		Dè Bus cons	
Pri	Principal Place of Business Multime Address							0	16)(1 88 (1) 88 (1) 89 (1) 88 (1)	i ailiti linia Alia Jasi	D1 0411 4801	
	=10700 WEST PLACER'ST EXPRESS ME											
	HETTP HAMLEL 331	74		BILLING INC 1013 SW 67 AVE				٥	O NOT WRITE IN TH	IIS SPACE		
US				MIAMI, FL 33144-4757				3. Date Incorporated or Qualified				
L								10/04/1993				
	Principal Pl	Frincipal Place of Business			2a. Mailing Address			4. FEI Number 65-0442462	•		plied For	
21	Suite, Apt. #, etc.				Suite, Apl. #, etc.					\$8.75 A	t Applicable	
22				27				5. Certificate of Statu	us Desired	Fee Re		
1	City & State			City & State				6. Election Campaign Financing \$5.00 May Be				
23				28				Trust Fund Contribution Added to Fees				
Ļ	Zip	.' }			Zip Country 30			8. This corporation owes or has paid the current year Intangible				
24	24 25 29 29 29 8. Name and Address of Current Registered Agent								Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
├──	ALVAREZ, CARLOS A							10, Hamb and Addit	38 OF FIGURE	ou Agoin		
1040 CM PTH AVE							000-00-0		All Assessments			
MIAM) FL 33144						82	Street A	ddress (P.O. Box Number is	Not Acceptable)			
					83							
						84	City			85 Zip C	Sode	
L	•	<u> </u>					1 1		F	- I., 1 1 1 1		
11	Pursuant t	to the provisions o	f Sections 647.0502 r both in 02. State o	⁾ and 607,1508, Flo of Horida, Such cha	rida Statutes, th Inde was autho	ie abov rized b	e-named of the corbi	orporation submits this state oration's board of directors	ement for the purpos I hereby accept the	of changing its appointment as	s registered registered	
	agent I ar	m familiar with	d na utine obliga	tions of, Section 60	7.0505. Florida			Minima	9/1	50 C	0	
SI	GNATURE.	Signature typing which	at name of registered ages	Carro the if armie able	(NOTE Boo	Stered Ac		Pequired when re-instating)	OAT.	-21-01	0	
12			OFFICERS AND	and the second second second		13.			GES TO OFFICERS A	AND DIRECTOR	S IN 12	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the reserve or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an accurate with an address

305.366

FILED

May 19 1998 8:00am