SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

96 AUG -7 PM 12:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000069071 (6)**

1. Corporation Name
C AND I BILLING SERVICES, INC.

Principal Place of Business
8335 S.W. 40TH ST.
MIAMI FL 33155

Mailing Address
8335 S.W. 40TH ST.
MIAMI FL 33155

3. Date Incorporated or Qualified: 09/20/1994
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business — 21
Suite, Apt #, etc — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt #, etc — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: 65-0521929 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
~~RUIZ, CARLOS H~~
~~14260 S.W. 36TH ST.~~
~~MIAMI FL 33175~~

10. Name and Address of New Registered Agent
81 Name: IDANIA HERNANDEZ
82 Street Address (P.O. Box Number is Not Acceptable): 1256 West 79 ST
83
84 City: Hialeah FL 85 Zip Code: 33014

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Idania Hernandez
Signature (typed or printed) of registered agent and the capacity (NOTE: Registered Agent signature required when resignation) DATE

12. OFFICERS AND DIRECTORS

TITLE	~~N~~	☒ DELETE
NAME	~~RUIZ, CARLOS H~~	
STREET ADDRESS	~~14260 S.W. 36TH ST.~~	
CITY-ST-ZIP	~~MIAMI FL 33175~~	
TITLE	V	☐ DELETE
NAME	HERNANDEZ, IDANIA	
STREET ADDRESS	1256 WEST 79TH ST.	
CITY-ST-ZIP	HIALEAH FL 33014	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☐ Change ☒ Addition
1.2 NAME	Esther de la Osa	
1.3 STREET ADDRESS	8341 S.W. 40 ST	
1.4 CITY-ST-ZIP	Miami - Fl 33155	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME	500001915235	
2.3 STREET ADDRESS	08/07/96- 01015-062	
2.4 CITY-ST-ZIP	****225.00 ****225.00	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP	A. Alan 8-5-96	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Idania Hernandez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/96 220-2255
Date Daytime Phone #

CR2E034 (3/96)