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

PROFIT CORPORATION ANNUAL REPORT

1997

4727 S.W. 74TH AVENUE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500008806 (8)

AML BILLING SERVICES, INC.

Principal Place of		

Mailing Address

4727 S.W. 74TH AVENUE MIAMI FL 33155-4416

## FILED Feb 27 1997 8:00am Secretary of State



Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Suite, Apt. #, etc.  City & State  City & State  City & State  Trust Fund Contribution  Country  Suite, Apt. #, etc.  Sui	MIAMI FI, 3315	<b>J</b>	MIAMI PL 33133-9910			
201   NOS   5U   60 Street   50   NOS   5U   60 Street   50   NOS   5U   60 Street   50   NOS   5U   60 Street   50 State   75 Additional   750 Additional						
Solito April Part No. 2012   Solito April Part No. 2013   Solito April Part No. 2013   Solito April Part No. 2013   Milami FL						Applied For
City & State   City & Ci				<u>කු නැ</u>	65-0558082	
28	22				5. Certificate of Status Desired	1 1 7
Country   29   DSA			Lucian Control of the	L		
28   35   75   28   0.5   29   35   17   30   0.5   10. Name and Address of New Registered Agent   10. Name and Addre	Ζιp	Country		Country		<del></del>
LANZA, ALINA M BOH SW 122 AVE., APT #201 MIAMI FL 33186  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 effect or registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered effect or registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered effect or registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered signed. The purpose of changing its registered signed was authorized by the corporation's board of directors. I hereby accept the appointment as registered signed. The purpose of Changing its registered agent signature snowled when reminently accept the appointment as registered agent signature snowled when reminently accept the appointment as registered agent signature snowled when reminently accept the appointment as registered agent signature snowled when reminently accept the appointment as registered agent signature snowled when reminently accept the appointment as registered agent signature snowled when reminently accept the appointment as registered agent signature snowled when reminently accept the appointment as registered agent and	24 3317	3 [25] USA	29 33173 3	OSA	Florida Statutes	] Yes 🔲 No
BOUT SW 122 AVE., APT #201 MAMI FL 33188  B2 Street Address (P.O. Box Number is Not Acceptable)  B3 Street Address (P.O. Box Number is Not Acceptable)  B4 City High Street Address (P.O. Box Number is Not Acceptable)  B5 Street Address (P.O. Box Number is Not Acceptable)  B6 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B7 Street Address (P.O. Box Number is Not Acceptable)  B8 City High Street Address (P.O. Box Number is Not Acceptable)  B8 Street Address (P.O. Box Number is Not Acceptable)  B8 Street Address (P.O. Box Number is Not Acceptable)  B8 Street Address (P.O. Box Number is Not Acceptable)  B8 Street Address (P.O. Box Number is Not Acceptable)  B8 Street Address (P.O. Box Number is Not Acceptable)  B8 Street Address (P.O. Box Number is Not Acceptable)  B1 Street Address (P.O. Box Number is Not Acceptable)  B1 Street Address (P.O. Box Number is Not Acceptable)  B1 Street Address (P.O. Box Number is Not Acceptable)  B1 Street Address (P.O. Box Number is Not Acceptable)  B1 Street Address (P.O. Box Number is Not Acceptable)  B1 Street Address (P.O. Box Number is Not Acceptable)  B1 Street Address (P.O. Box Number is Number is Number in Number in Number is Number in N			t Registered Agent		10. Name and Address of New Re	gistered Agent
MAMI FL 33188    B2   Street Address (P.O. Box Number is Not Acceptable)   Recommendation		•			LASSA Alina	M
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 agent, or both, in the State of Horida. Such change was authorized by the corporation's border of directors. I hereby accept the appointment as registered agent, and brinder with, and accept the obligations of, Section 607 0505. Florida Statutes.    12.				82 Street	Address (P.O. Box Number is Not Acceptab	ule)
11. Fursion to the provisions of Sections 607 0562 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Horida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and familiar with, and accept the object of social soor 607 6505. Florida Statutes.    12.	MIAM	WI FL 33186		1	0666 6.W. 76 T	errace
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the pursue of changing its 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, or both, in the State of Florida Statutes agent. Team familiar with, and accept the objection 607 0505. Florida Statutes  SIGNATURE  20				83		
11. Pressure 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 agent. Tamifamiliar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  2. OFFICER SIAD DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. OFFICER SIAD DIRECTORS IN 12.  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  16. LANZA, ALINA M  9041 SW 122 AVE., #201  16. DELETE  17. THE  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  19. LANZA, ALINA M  9041 SW 122 AVE., #201  19. LANZA, ALINA M  9041 SW 122 AVE., #201  10. DELETE  23. STREET ADDRESS  14. CITY-ST-2P  10. DELETE  33. STREET ADDRESS  24. CITY-ST-2P  10. DELETE  34. CITY-ST-2P  10. DELETE  35. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  10. LANZA, ALINA M  9041 SW 122 AVE., #201  10. LANZA, ALINA M  9041 SW 122 AVE., #201  10. DELETE  31. THE  23. STREET ADDRESS  24. CITY-ST-2P  10. DELETE  34. CITY-ST-2P  10. DELETE  35. THE ADDRESS  24. CITY-ST-2P  10. DELETE  35. THE ADDRESS  25. STREET ADDRESS  26. CITY-ST-2P  10. DELETE  35. THE ADDRESS  26. CITY-ST-2P  10. DELETE  35. THE ADDRESS  26. CITY-ST-2P  10. DELETE  35. STREET ADDRESS  26. CITY-ST-2P  10. DELETE  35. STREET ADDRESS  26. CITY-ST-2P  10. DELETE  35. STREET ADDRESS  36. STREET ADDRESS  37. STREET ADDRESS  36. STREET ADDRESS  37. STREET ADDRESS  37. STREET ADDRESS  37. STREET ADDRESS  37. STREET ADDRESS  38. STREET				84 City	Hiani	FI 85 Zip Code
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, 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, in the minimum with an accept the objection of Scotion 607 605. Florida Statutory is controlled by the corporation's board of directors. I hereby accept the appointment as registered agent, in the minimum with a sequential product of the pr	11. Pursuant t	to the provisions of Sections 607 0502	2 and 607.1508, Florida Statutes	, the above-named	corporation submits this statement for the p	urnose of changing its registered
Signature performance inspectors appealable (ROSIE Separated Agencia Separater separ	office or re agent. I a	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was aut dions of, Section 607.0505, Florid	thorized by the corp da Statutes.	oration's board of directors. I hereby accep	ot the appointment as registered
THE				Registered Agent signature	required when reinstating)	DATE
NAME   STREET ADDRESS   CHY-ST-ZIP   Change   Addition		OFFICERS AND			ADDITIONS/CHANGES TO OFFICE	
STREET ADDRESS   SOAT SW 122 AVE., #201   13 STREET ADDRESS   14 CITY-ST-2IP     Change   Addition   Additio		U	☐ DELETE		$Y, D_{C}$	Change Addition
City-St-Zep					Alina M Lanza	• •
DELETE   DELETE   21 TITLE   Change   Addition					10666 SW 76 Terra	re.
NAME		MINMIT	DEFETS	<b>4</b>	MIAMI FL 33173	
STREET ADDRESS   23 STREET ADDRESS						•
2   CITY-ST-ZIP					1.43	,
DELETE						
STREET ADDRESS   STRE			DELETE			Change Addition
STREET ADDRESS   33 STREET ADDRESS   34 CITY-ST-ZIP	NAME			1		
STREET ADDRESS   STRE	STREET ADDRESS					
THE	į.					•
STREET ADDRESS			DELETE		**************************************	Change Addition
A 4 CITY - ST - ZIP	NAME			4 2 NAME		
THE DELETE 51 TITLE Change Addition NAME STREET ADDRESS CITY ST - ZIP THLE DELETE 61 TITLE STREET ADDRESS CITY ST - ZIP THLE 62 NAME STREET ADDRESS CITY ST - ZIP STREET ADDRESS CITY ST - ZIP THLE 63 STREET ADDRESS CITY ST - ZIP 64 CITY - ST - ZIP 64 CITY - ST - ZIP	STREET ADDRESS			4 3 STREET ADDRESS		
NAME         52 NAME           STREET ADDRESS         53 STREET ADDRESS           CITY ST-ZIP         54 CITY-ST-ZIP           TITLE         DELETE         61 TITLE         Change         Addition           NAME         62 NAME           STREET ADDRESS         63 STREET ADDRESS         CITY-ST-ZIP	CHY-51-201			4.4 CiTY - ST - ZiP		
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	NAME			52 NAME		
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STREET ADDRESS City-ST-ZIP 63 STREET ADDRESS 64 City-ST-ZIP	ł		☐ DELETE	61 TITLE		☐ Change ☐ Addition
C(1)Y-S1-Z(P) 64 C(1)Y-S1-Z(P)	Ì			6.2 NAME		
	STREET ADORESS			63 STREET ADDRESS	•	

I do needly certify that the mornison supplied with his lining does not does not does not receive the same legal effect as if made under oath; that 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 tripstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with an address.

SIGNATURE:

CHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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(306) 596.0041