2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2010
Secretary of State

DOCUMENT# P95000035470

Entity Name: ACCURATE MEDICAL BILLING SERVICES OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

377 MAITLAND AVE.
SUITE 2007
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

1390 HOPE ROAD
SUITE 300
MAITLAND, FL 32751 US

Current Mailing Address:

P O BOX 948606
MAITLAND, FL 327948606 US

New Mailing Address:

FEI Number: 59-3312400 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZAMAN, MOHAMMED B
377 MAITLAND AVE.
SUITE 2007
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

ZAMAN, MOHAMMED B
1390 HOPE ROAD
SUITE 300
MAITLAND, FL 32751 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: MOHAMMED B ZAMAN 07/24/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: ZAMAN, MOHAMMED B
Address: 1390 HOPE ROAD, STE 300
City-St-Zip: MAITLAND, FL 32751

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: MOHAMMED B ZAMAN P 07/24/2010
Electronic Signature of Signing Officer or Director Date