

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000046981

FILED
Apr 14, 2010
Secretary of State

Entity Name: PROFESSIONAL MEDICAL TRANSCRIPTION, INC.

Current Principal Place of Business:

5359 CR 122 NORTH
WILDWOOD, FL 34785

New Principal Place of Business:

Current Mailing Address:

5359 CR 122 NORTH
WILDWOOD, FL 34785

New Mailing Address:

FEI Number: 59-3378950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLAGG, M V
5359 CR 122 NORTH
WILDWOOD, FL 34785 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST
Name: FLAGG, M V
Address: 5359 CR 122 NORTH
City-St-Zip: WILDWOOD, FL 34785

Title: D
Name: FLAGG, M V
Address: 5359 CR 122 NORTH
City-St-Zip: WILDWOOD, FL 34785

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: MV FLAGG

PRES

04/14/2010

Electronic Signature of Signing Officer or Director

Date