

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000082580

FILED  
Feb 02, 2005  
Secretary of State

Entity Name: GSR PHYSICIANS BILLING SERVICE, INC.

## Current Principal Place of Business:

10096 GRIFFIN ROAD  
COOPER CITY, FL 33328

## New Principal Place of Business:

## Current Mailing Address:

10096 GRIFFIN ROAD  
COOPER CITY, FL 33328

## New Mailing Address:

FEI Number: 65-0706637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACOBSON, RONALD  
10096 GRIFFIN ROAD  
COOPER CITY, FL 33328 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: DP ( ) Delete  
Name: CANE, HERB  
Address: 6130 NW 42 WAY  
City-St-Zip: BOCA RATON, FL 33496

Title: DST ( ) Delete  
Name: JACOBSON, STEVEN J  
Address: 10140 NW 13 ST  
City-St-Zip: PLANTATION, FL 33322

Title: TRES ( ) Delete  
Name: JACOBSON, RONALD  
Address: 4309 FOX RIDGE DRIVE  
City-St-Zip: WESTON, FL 33331

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RONALD JACOBSON

TRES

02/02/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date