# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 31, 2010**
**Secretary of State**

DOCUMENT# P96000082580

**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:**

VISWAMBHARAN, PRADEEP
4309 FOX RIDGE DRIVE
WESTON, FL 33331 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: VP
Name: VISWAMBHARAN, PRADEEP
Address: 10096 GRIFFIN ROAD
City-St-Zip: COOPER CITY, FL 33328

Title: P
Name: JACOBSON, RONALD
Address: 10096 GRIFFIN ROAD
City-St-Zip: COOPER CITY, FL 33328 BR

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: RONALD JACOBSON P 03/31/2010

Electronic Signature of Signing Officer or Director Date