2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# P96000085360

Entity Name: MED PRO BILLING, INC.

Current Principal Place of Business:

6191 ORANGE DR
STE 6167
FORT LAUDERDALE, FL 33314

New Principal Place of Business:

Current Mailing Address:

1928 NE 154TH ST
NO MIAMI BEACH, FL 33162

New Mailing Address:

6191 ORANGE DR
STE 6167
FORT LAUDERDALE, FL 33314

FEI Number: 65-0701107 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OPPENHEIM, ROY D ESQ
2500 WESTON RD STE 404
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: P ( ) Delete
Name: ZACHARIASZ, MELISSA
Address: 1928 N.E. 159ST
City-St-Zip: N. MIAMI BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ZACHARIASZ, MELISSA
Address: 13331 SW 39TH STREET
City-St-Zip: DAVIE, FL 33314 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MELISSA ZACHARIASZ MRS. 02/23/2009

Electronic Signature of Signing Officer or Director Date