

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000020573

FILED  
Feb 21, 2008  
Secretary of State

**Entity Name:** PROFESSIONAL MEDICAL TRANSCRIBING OF BRANDON, INC.

**Current Principal Place of Business:**

178 MARINER BLVD STE 110  
SPRING HILL, FL 34609

**New Principal Place of Business:**

477 ARCHWAY DRIVE  
SPRING HILL, FL 34608

**Current Mailing Address:**

PO BOX 3465  
SPRING HILL, FL 346113465

**New Mailing Address:**

**FEI Number:** 59-3499513

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HANDEL, KENNETH K  
477 ARCHWAY DR.  
SPRING HILL, FL 34608 US

**Name and Address of New Registered Agent:**

HANDEL, KENNETH K OWNER  
477 ARCHWAY DR.  
SPRING HILL, FL 34608 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: KENNETH K HANDEL

02/21/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HANDEL, KENNETH K  
Address: 477 ARCHWAY DR  
City-St-Zip: SPRING HILL, FL 34608

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: KENNETH K HANDEL

PRES

02/21/2008

Electronic Signature of Signing Officer or Director

Date