2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2005
Secretary of State

DOCUMENT# P98000100418

Entity Name: DOCTORS BILLING ASSOCIATES, INC.

Current Principal Place of Business:

951 N W 13TH ST
2D
BOCA RATON, FL 33486

New Principal Place of Business:

660 GLADES ROAD
306
BOCA RATON, FL 33431

Current Mailing Address:

951 N W 13TH ST
2D
BOCA RATON, FL 33486

New Mailing Address:

600 GLADES ROAD
306
BOCA RATON, FL 33431

FEI Number: 65-0871675 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEVON, LEAH
827 NE 33RD STREET
BOCA RATON, FL 33431 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DEVON, LEAH
Address: 951 NW 13TH STREET
City-St-Zip: BOCA RATON, FL 33486

Title: VP ( ) Delete
Name: DEVON, JEFFREY
Address: 951 NW 13TH STREET
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DEVON, LEAH
Address: 660 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33431

Title: VP (X) Change ( ) Addition
Name: DEVON, JEFFREY
Address: 600 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33431

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: LEAH DEVON PRES 07/01/2005

Electronic Signature of Signing Officer or Director — Date