2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900009683 1. Entity Name KBM BILLING SERVICES, INC.				Secretary of State 02-21-2002 90023 007 ***150.00			
Principal Place of Business 15401 SW 49 ST MIAMI FL 33185		Mailing Address 15401 SW 49 ST MIAMI FL 33185		1 (44)/400 /10 (4)/4 /10/	920149		
2. Principal Place of Business		3. Mailing Address			[]	(0 0 (10)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NO	DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number 65-088	32274	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status De		5 Additional Required	
	6. Name and Address of Current Re	gistered Agent		7. Name and Address o	New Registered Agent		
FERNANDEZ, HERNAN 27553 S. DIXIE HWY. MIAMI FL 33032			Name Street Address	Street Address (P.O. Box Number is Not Acceptable)			
			City	·	FL Z	ip Code	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State		10. Election Campaign Financing S5.00 May Be Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVERA, CARMEN 6956 SW 111TH PLACE MIAMI FL 33173	RECTORS Delete	12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES		CTORS IN 11 change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		c	hange	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			hange 🗌 Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ CI	hange Addition	
indicated of the co	certify that the information supplied with the don this report or supplemental report is true reportion or the receiver or trustee engower, or on an attachment with an address, with	ue and accurate and that my ered to execute this report a	v signature shall have the	e same legal effect as if made	under oath; that I am an	officer or director	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR