2002 UNIFORM BU DOCUMENT # S238	<u> </u>	NI (UDK	May 10, 1	LED 2002 8:00 ar ry of State 0057 004 ***158 75
1. Entity Name		/	Secreta	ry of State
ADVANCED PHYSICIAN BILLING I	INC.		05-10-2002 90	0057 004 ***158.75
Principal Place of Business	Mailing Address	····		
7315 SW 87 AVENUE MIAMI FL 33173	7315 SW 87 AVENUE MIAMI FL 33173			
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. Principal Place of Business HOVANCED Physician	A Mailing Address	AMR.	I LOUILEAN RIG IAUGU AIRE OLAID NÉIDI I	OLI DIRI OLU ÖLÜR OLU ILAN ALU ILAN
Suite, Apt. #, etc.	Suite Apt. #, etc.	200	DO NOT WRITE	IN THIS SPACE
City & State	V.e # 4	200	4. FEI Number	Applied For
MIAMI	<u> </u>		65-0237047	Not Applicable
Zip VL S3173	3 Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Curre	ent Registered Agent		7. Name and Address of New Reg	
Perez, Jorge E.		Name		
7315 SW 87TH AVE		Street Addre	ess (P.O. Box Number is Not Acceptable)	
SUITE #200				· · · · ·
MIAMI FL 33173		City		FL Zip Code
The above named entity submits this statemen	nt for the purpose of changing its r	registered office or reg	istered agent, or both in the State of Floric	• • •
This corporation is eligible to satisfy its Intangi		! FEE IS \$150.00	quired when reinstating)	Cing \$5.00 May Ba
Tax filing requirement and elects to do so. (See criteria on back)	After May 1, 200 Make Check Payabl	FEE IS \$150.00 Fee will be \$550.0 to Department of	00 10. Election Campaign Finan Trust Fund Contribution.	icing \$5.00 May Be Added to Fees
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