

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V19884

FILED
Jul 08, 2008
Secretary of State

Entity Name: SMART MEDICAL BILLING SERVICES, INC.

Current Principal Place of Business:

10100 NW 116 WAY
SUITE 18
MEDLEY, FL 33178 US

New Principal Place of Business:

5750 COLLINS AVE
APT 6H
MIAMI BEACH, FL 33140 US

Current Mailing Address:

10100 NW 116 WAY
SUITE 18
MEDLEY, FL 33178 US

New Mailing Address:

5750 COLLINS AVE
APT 6H
MIAMI BEACH, FL 33140 US

FEI Number: 65-0319383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUERRERO, ELVIRA
5750 COLLINS AVE APT 6H
MIAMI BEACH, FL 33140 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: PD () Delete
Name: GUERRERO, ELVIRA,
Address: 10100 NW 116 WAY
City-St-Zip: MEDLEY, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GUERRERO, ELVIRA,
Address: 5750 COLLINS AVE, APT 6H
City-St-Zip: MIAMI BEACH, FL 33140

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: ELVIRA GUERRERO

PD

07/08/2008

Electronic Signature of Signing Officer or Director

Date