

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000128330

**Entity Name:** OPTIMED BILLING SOLUTIONS, INC.

**Current Principal Place of Business:**

5342 CLARK RD.  
SUITE 166  
SARASOTA, FL 34233

**Current Mailing Address:**

5342 CLARK RD.  
SUITE 166  
SARASOTA, FL 34233 US

**FEI Number:** 20-5690998

**Certificate of Status Desired:** No

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

CAREY, JAMES M  
5342 CLARK RD  
166  
SARASOTA, FL 34233 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DPST  
Name CAREY, JAMES M  
Address 5342 CLARK RD #166  
City-State-Zip: SARASOTA FL 34233

*I hereby 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 all other like empowered.*

**SIGNATURE:** JAMES CAREY

**PRESIDENT**

**01/27/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date