

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000010210

Entity Name: ON-TIME MEDICAL BILLING SERVICES,INC.

Current Principal Place of Business:

5272 NW 197 TERRACE
MIAMI GARDENS, FL 33055

Current Mailing Address:

5272 NW 197 TERRACE
MIAMI GARDENS, FL 33055 US

FEI Number: 82-1312844

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANCOIS, DELIVRANCE
5272 NW 197 TERRACE
MIAMI GARDENS, FL 33055 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 P
Name FRANCOIS, DELIVRANCE
Address 5272 NW 197 TERRACE
City-State-Zip: MIAMI GARDENS FL 33055

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: DELIVRANCE FRANCOIS

PRESIDENT

05/01/2018

Electronic Signature of Signing Officer/Director Detail

Date