

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000085360

**Entity Name:** MED PRO BILLING, INC.

**Current Principal Place of Business:**

7200 W. MCNAB ROAD  
TAMARAC, FL 33321

**Current Mailing Address:**

7200 W. MCNAB ROAD  
TAMARAC, FL 33321

**FEI Number:** 65-0701107

**Certificate of Status Desired:** No

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

SHAHEED, ANELIA ESQ.  
2500 WESTON RD STE 404  
WESTON, FL 33331 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:** ANELIA SHAHEED

01/13/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ZACHARIASZ, MELISSA  
Address 13331 SW 39TH STREET  
City-State-Zip: DAVIE FL 33330

*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:** MELISSA ZACHARIASZ

CEO

01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date