

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000066689

Entity Name: WORKERS' COMPENSATION NETWORK INC.

Current Principal Place of Business:

9440 SW 8TH STREET
SUITE 417
BOCA RATON, FL 33428

Current Mailing Address:

9440 SW 8TH STREET
SUITE 417
BOCA RATON, FL 33428

FEI Number: 20-2887841

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DELUCIA, MICHAEL A
9440 SW 8TH STREET
SUITE 417
BOCA RATON, FL 33428 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 PRES
Name DELUCIA, MICHAEL A
Address 9440 SW 8TH STREET SUITE 417
City-State-Zip: BOCA RATON FL 33428

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: MICHAEL DELUCIA

PRESIDENT

04/05/2014

Electronic Signature of Signing Officer/Director Detail

Date