

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000085049

Entity Name: CLAIM QUEST, INC.

Current Principal Place of Business:

1245 SCHOONER LN
VENICE, FL 34285

Current Mailing Address:

P.O. BOX # 1075
VENICE, FL 34284 US

FEI Number: 20-0437241

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARRAL, MICHAEL
1245 SCHOONER LN
VENICE, FL 34285 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 BARRAL, MICHAEL
Address 1245 SCHOONER LN
City-State-Zip: VENICE FL 34285

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 BARRAL

PRESIDENT

03/26/2015

Electronic Signature of Signing Officer/Director Detail

Date