

**2013 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: Yes**

**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**

**04/25/2013**

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

\_\_\_\_\_  
Date