

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000063701

**Entity Name:** LIBERTY CLAIMS CONSULTANTS INC

**Current Principal Place of Business:**

1000 NW NORTH RIVER DRIVE  
117  
MIAMI, FL 33136

**Current Mailing Address:**

1000 NW NORTH RIVER DRIVE  
117  
MIAMI, FL 33136 US

**FEI Number:** 27-3186137

**Certificate of Status Desired:** No

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

RICE, EVAN  
1000 NW NORTH RIVER DRIVE  
117  
MIAMI, FL 33136 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            D  
Name            RICE, EVAN S  
Address        1000 NW NORTH RIVER DRIVE  
                  117  
City-State-Zip: MIAMI FL 33136

Title            D  
Name            QUINTERO, GEORGE A  
Address        1000 NW NORTH RIVER DRIVE  
                  117  
City-State-Zip: MIAMI FL 33136

*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:** EVAN RICE

**DIRECTOR**

**04/23/2015**

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

\_\_\_\_\_  
Date