2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # F02000006331

1. Entity Name

CITY-ST-ZIP TITLE NAME STREET ADDRESS

ISO CLAIMS SERVICES, INC.



FILED Jan 22, 2007 08:00 AM Secretary of State

CR2E034 (11/05)

Fee Required

Principal Place of Business

250 BERRYHILL ROAD COLUMBIA SC, 29 210 Mailing Address

545 WASHINGTON BLVD 21ST FLOOR JERSEY CITY, NJ 07310



01102007 DO NOT WRITE IN THIS SPACE

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4. FEI Number	Applied For
13-4160667	 Not Applicable
5. Certificate of Status Desired	.75 Additional

6. Name and Address of Current Registered Agent

AGULIA, THOMAS

No Chg-P

3491 SW SAWGRASS VILLAS DRIVE PALM CITY, FL 34990		IN THIS SPACE				
8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable, (NOTE, Registered	Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIRECT PD COYNE, FRANK J 545 WASHINGTON BLVD JERSEY CITY, NY 07310 CS THOMPSON, KENNETH 545 WASHINGTON BLVD	TORS		•	000000597984 01/24/07-80057-024 150.00	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	JERSEY CITY, NJ 073101686 VT GERAGHTY, KENNETH G 545 WASHINGTON BLVD JERSEY CITY, NY 07310				NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				iN	THIS SPACE	

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or 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 in Block 10 or F changed, or on an attachment with an address, with all other like empowered.