

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K03162

FILED  
Feb 06, 2004  
Secretary of State

Entity Name: NATIONAL CLAIMS REVIEW, INC.

## Current Principal Place of Business:

16115 SW 117TH AVE  
A19  
MIAMI, FL 33157 US

## New Principal Place of Business:

16115 SW 117TH AVE  
A19  
MIAMI, FL 33177 US

## Current Mailing Address:

16115 SW 117TH AVE  
A 19  
MIAMI, FL 33157 US

## New Mailing Address:

16115 SW 117TH AVE  
A 19  
MIAMI, FL 33177 US

FEI Number: 59-2860230

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SADLER DALE A.  
16115 SW 117TH AVE  
A 19  
MIAMI, FL 33157 US

## Name and Address of New Registered Agent:

SADLER DALE A.  
16115 SW 117TH AVE  
A 19  
MIAMI, FL 33177 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: DALE A SADLER

02/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SADLER, DALE.,  
Address: 16115 SW 117TH AVE #A-19  
City-St-Zip: MIAMI, FL

Title: STD ( ) Delete  
Name: SADLER, REGINA.,  
Address: 16115 S.W. 117TH AVE #A-19  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DALE A SADLER

PD

02/06/2004

Electronic Signature of Signing Officer or Director

Date