FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # K06370

(6)

SPECIALTY CLAIMS ADJUSTERS, INC.

FILED Mar 21 1997 8:00am Secretary of State



Frincipal Place of Business Mailing Address			ET OLUTE 4	.nen					
B300 WEST FLA MIAMI FL 33144	AGLER STREET SUITE #250	8300 WEST FLAGLER STREE MIAMI FL 33144-2096	EI SUIIE A	250					
					3. Date Incorporated 12/10/1987	or Qualified		of Last R 1/1996	eport
F	ace of Business	2a, Mailing Address			4. FEI Number 65-0018729		<u></u>		oplied For of Applicable
Suite, Apt		Suite, Apt #, etc.			03 00 101 20				Additional
22	# ₁ tile:	27]			5. Certificate of State	us Dosired			equired
City & State	· · · · · · · · · · · · · · · · · · ·	City & State			6. Election Campaig	n Financing		\$5.00	May Be
23		28			Trust Fund Contri	_			to Fees
Zφ	Country	Zip	Country		8. This corporation h				. 199.032,
24	25		30		Florida Statutes	Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Curre	nt Registered Agent	81	Nam		88 Of New He	gistered A	gent	
RICC	CIARDELLI, RICK	TT #0E0	61	INAIII	e				
	WEST FLAGLER STREET SUI	IE #200	82	Stree	t Address (P.O. Box Number is	Not Acceptab	ole)		
MIA	AI FL 33144		83						
			84	City			FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607,05	02 and 607.1508, Florida Statute	s, the above	e-name	ed corporation submits this state	ement for the p	ourpose of c	hanging i	ts registered
l office or r	egistere's agent or both, in the Stab m familiar with, and accept the oblig	e of Florida. Such change was a	uthorized by	/ the co	orporation's board of directors.	I hereby accep	ot the appoi	intment as	registered
	The make vary, they conseign the cons	initial of cooler on wood, Fro-	TOTAL CHARGO						
SIGNATURE	tallor at well typeship per hid it amonof regel to red by	pint and title it applicable (NOTE	Registered Age	nt signat	ire required when reinstating)		DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHAN	GES TO OFFIC			
100.6	PD	☐ DELETE	1 1 THTLE				E	Change	Addition
NAME	RICCIARDELLI, JOHN		1.2 NAME						
STHEET ACIDIRES?	8300 WEST FLAGLER ST		1.3 STREET	ADDRES	S				
CHY 51 7P	MIAMI FL	COLETE	1.4 CITY - S	T-ZIP			<u>r</u>	Change	Addition
111,0	VD Borges, Denice	DELETE	i i					Change	L_ Addition
N ₂ Mt	8300 WEST FLAGLER ST		2 2 NAME	IDDAFA					ļ
STREET ADDRESS	MIAMI FL		2.3 STREET						
OTY ST ZIF			2. 4 CITY- 3.1 TiTLE	S1-ZIP				Change	Addition
Title ² NAM	RICCIARDELLI, DEBBIE W.	Control of the control	3.2 NAME				_		
SIRFET ADDRESS	8300 WEST FLAGLER ST		3.3 STREET	ADDRES	s				
C In St ZiP	MIAMI FL		3 4. CITY-						
1016	D	☐ DELETE	4 % TITLE				Ī	Change	Addition
RAME	RICCIARDELLI, RIKKI		4.2 NAME						
STREET ADDRESS	8300 WEST FLAGLER ST		4.3 STREE	ADDRES	s				
O(1x+S) 7IF	MIAMI FL		4.4 CITY - ST - Z						
1Fixt	D	☐ DELETE	5.1 TITLE				-	Change	Addition
NAME	TURTURRO, ALICIA		5.2 NAME						
SERRE L'ADDRESS	8300 WEST FLAGLER ST		5.3 STREE	I ADDRES	s				
CHY S1 70	MIAMI FL		5 4 CITY-	3T - 7IP					# A 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
titt		L_J DELETE	6.1 TITLE				l	Change	Addition
NAM!			62 NAME						
STREET AUDRESS			63 STREE		S				
City-St-7			64 CHY-	ST-ZIP	n stated in Section 119.07(3)(i),	Elorida Statuta	o I fuether	cartify the	t tha
1 14 I rio hore	by certify that the info cuation suppli	BELL WILLIAM TO THE THE PROPERTY OF THE PROPER	v i or nas exe	artii,JUOI	+ state() III Obcd(Of) TTS O7(3)(1),	TIVITUA SIATUIE	الكالهالها ويور	cormy irid	1010

information indicated on the annual report or supplemental and Lam an other or director of the corporation or the receiver of r

report is true and a curate and that my signature shall have the same legal effect as if made under oath; that the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name with an address.