


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004 08:00 AM
Secretary of State

DOCUMENT # N99000000444
 1. Entity Name
PROCLAIM INTERNATIONAL, INC.



Principal Place of Business 2200 NW 2ND AVE SUITE 213 BOCA RATON, FL 33431 US	Mailing Address 2200 NW 2ND AVE SUITE 213 BOCA RATON, FL 33431 US
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07202004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0894882	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BUERER, JOHN
 159 NW 70TH ST
 #416
 BOCA RATON, FL 33487

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PMD BUERER, JOHN M 159 NW 70TH ST #416 BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMPSON, TERRY 1730 SW 22ND AVE FORT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD THOMPSON, CAROL 1730 SW 22ND AVE FORT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUERER, ANNABEL M 159 NW 70TH ST #416 BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VILLOBOS, JESUS 7401 SILVERWOOD CT BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEON, JOSE LUIS 4337 PALM FOREST DR DELRAY BEACH, FL 33445

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 07/23/04-80002-003 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: John Buerer **JOHN BUERER** July 20, 2004 561 394 9800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #