2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N99000000444

Entity Name: PROCLAIM INTERNATIONAL, INC.

Current Principal Place of Business:

2205 NW 30TH PLACE
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

2205 NW 30TH PLACE
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 65-0894882 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUERER, JOHN
159 NW 70TH ST
#416
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	PMD	( ) Delete
Name:	BUERER, JOHN M	
Address:	159 NW 70TH ST #416	
City-St-Zip:	BOCA RATON, FL 33487	
Title:	D	( ) Delete
Name:	THOMPSON, TERRY	
Address:	1730 SW 22ND AVE	
City-St-Zip:	FORT LAUDERDALE, FL 33312	
Title:	SD	( ) Delete
Name:	THOMPSON, CAROL	
Address:	1730 SW 22ND AVE	
City-St-Zip:	FORT LAUDERDALE, FL 33312	
Title:	D	( ) Delete
Name:	BUERER, ANNABEL M	
Address:	159 NW 70TH ST #416	
City-St-Zip:	BOCA RATON, FL 33487	
Title:	D	( ) Delete
Name:	CHERRY, CHARLES	
Address:	17137 NEWPORT CLUB DRIVE	
City-St-Zip:	BOCA RATON, FL 33496	
Title:	D	( ) Delete
Name:	LEON, JOSE LUIS	
Address:	4337 PALM FOREST DR	
City-St-Zip:	DELRAY BEACH, FL 33445	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN BUERER MR. 01/16/2009
Electronic Signature of Signing Officer or Director — Date