

2010 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 08, 2010
Secretary of State

Entity Name: CLAIM LOSS CONSULTANTS, INC.

Current Principal Place of Business:

9711 DARLINGTON PL
COOPER CITY, FL 33328

New Principal Place of Business:

5220 S UNIVERSITY DR.
C 208
DAVIE, FL 33328

Current Mailing Address:

9711 DARLINGTON PL
COOPER CITY, FL 33328

New Mailing Address:

5220 S UNIVERSITY DR.
C 208
DAVIE, FL 33328

FEI Number: 65-1054308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORDONEZ, GALO R
9711 DARLINGTON PL
COOPER CITY, FL 33328 US

Name and Address of New Registered Agent:

ORDONEZ, GALO R
5220 S. UNIVERSITY DR.
C 208
DAVIE, FL 33328 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:

03/08/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: ORDONEZ, GALO R
Address: 5220 S UNIVERSITY DR. # C 208
City-St-Zip: DAVIE, FL 33328

I hereby 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 all other like empowered.

SIGNATURE: RICHARD ORDONEZ

PRES

03/08/2010

Electronic Signature of Signing Officer or Director

Date