

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 22, 2002 8:00 am
Secretary of State

07-22-2002 90164 022 ***150.00

DOCUMENT #

PO000012761

1. Entity Name

compoclain, Inc. ✓

DO NOT WRITE IN THIS SPACE

B0130929

2. Principal Place of Business

816 NE 52nd Street

3. Mailing Address

(same)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Pompano Beach

City & State

4. FEI Number

65-1059984

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Christopher Neita

Street Address (P.O. Box Number is not acceptable)

816 NE 52nd Street

Pompano Beach FL

Zip 33064

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR PATRICIA POITIER 816 NE 52nd ST. POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR KIMOTHY HALL 5151 NW 43rd AVE COCONUT CREEK
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR CHRISTOPHER NEITA 19835 NW 10th ST. PEMB
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-448-4198

CR2E034B (12/01)

Attachment
DH#P0000118761
80130929

COMPUCLAIM INC.
816 NE 52nd Street
Pompano Beach, FL 33064

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Reinstatement of Corporation.
Compuclaim, Inc.

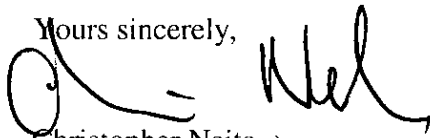
Dear Sirs:

Please find enclosed:

1. Our check for \$150, for the annual fee due for the foregoing Corporation.
2. We enclose the completed UBR.

Christopher Neita is the Registered Agent at 816 NE 52nd Street, Pompano Beach, FL 33064 and has not received any UBR at this address. Unfortunately, it is only just come to our attention that the filing fee for the year 2002 is unpaid and is now late. We are anxious to maintain this corporation and prevent the dissolution.

Yours sincerely,


Christopher Neita