

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000120413

Entity Name: PROCLAIM, INC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

16499 NE 19TH AVE.  
SUITE 105  
NORTH MIAMI BEACH, FL 33162

## New Principal Place of Business:

831 NE 182ND TERRACE  
NORTH MIAMI BEACH, FL 33162

## Current Mailing Address:

831 NE 182ND TERRACE  
NORTH MIAMI BEACH, FL 33162

## New Mailing Address:

7450 GRIFFIN ED  
SUITE 240  
DAVIE, FL 33314

FEI Number: 02-0651600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCOTT SICHAK  
831 NE 182 TERRACE  
NORTH MIAMI BEACH, FL 33162 US

## Name and Address of New Registered Agent:

SCOTT SICHAK  
7450 GRIFFIN RD  
SUITE 240  
DAVIE, FL 33314 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: SCOTT SICHAK

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PROPHETE, GOLDIE  
Address: 831 NE 182ND TERRACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VP ( ) Delete  
Name: SICHAK, HARRY  
Address: 831 NE 182ND TERRACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PROPHETE, GOLDIE  
Address: 831 NE 182 TERRACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GOLDIE PROPHETE

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date