

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000040558

1. Entity Name  
CLAIM MAX INC



05 OCT 10 AM 9:04

FLORIDA SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
3046 LIGHTHOUSE PLACE  
MARGATE, FL 33063 US

Mailing Address  
3046 LIGHTHOUSE PLACE  
MARGATE, FL 33063 US

2. Principal Place of Business  
7950 Nob Hill Road

3. Mailing Address  
7950 Nob Hill Road

Suite, Apt. #, etc.  
Suite 15-306

Suite, Apt. #, etc.  
Suite 15-306

City & State  
Tamarac, FL.

City & State  
Tamarac, FL.

Zip  
33332

Country  
Broward

Zip  
33332

Country  
Broward



**REINSTATEMENT**

05

4. FEI Number  
20-0818464

App  
Not

5. Certificate of Status Desired ☐ \$8.75 Add'l  
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, DEAN  
3046 LIGHTHOUSE PLACE  
MARGATE, FL 33063

7. Name and Address of New Registered Agent

Name  
Heather Davis  
Street Address (P.O. Box Number is Not Acceptable)  
7950 Nob Hill Road, Suite 15-306  
City  
Tamarac FL Zip Code  
33332

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, a the obligations of registered agent.

SIGNATURE Heather Davis (NOTE: Registered Agent signature required when reinstating) DATE 10/07/05

**FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005**

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

In accordance with s. 607.193(2)(b), F  
corporation did not receive the prior n

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
DAVIS, DEAN  
3046 LIGHTHOUSE PLACE  
MARGATE, FL 33063 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VP  
DAVIS, HEATHER  
3046 LIGHTHOUSE PLACE  
MARGATE, FL 33063 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
Heather Davis  
7950 Nob Hill Road, #15-306  
Tamarac, FL. 33332 ☒ Change

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change  
600059747326  
09/19/05--01056--001 \*\*150.00

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change

12. 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 10 or 11, as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Heather Davis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/14/05

Date Daytime Phone #