2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000078436

Entity Name: CLAIMS SERVICE INTERNATIONAL, INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3892 SW 48 AVE 271 SW PALM DR

HOLLYWOOD, FL 33023 PORT ST. LUCIE, FL 34986

Current Mailing Address: New Mailing Address:

PO BOX 220550 PO BOX 880505

HOLLYWOOD, FL 33022 PORT ST. LUCIE, FL 34988

FEI Number: 26-0508100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOTLIB, DOVRAT DONNA GOTLIB, DOVRAT DONNA 3892 SW 48 AVE 271 SW PALM DR

HOLLYWOOD, FL 33023 US PORT ST. LUCIE, FL 34986 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: DOVRAT DONNA GOTLIB 04/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition

 Name:
 GOTLIB, DOVRAT DONNA
 Name:
 GOTLIB, DOVRAT DONNA

 Address:
 3892 SW 48 AVE
 Address:
 271 SW PALM DR

 City-St-Zip:
 HOLLYWOOD, FL 33023
 City-St-Zip:
 PORT ST. LUCIE, FL 34986

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: DOVRAT DONNA GOTLIB P/D 04/24/2009