

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000020009

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** CARIBBEAN CLAIMS CONSULTANTS CORPORATION

**Current Principal Place of Business:**

2423 SW 147TH AVENUE  
SUITE 259  
MIAMI, FL 331854082

**New Principal Place of Business:**

**Current Mailing Address:**

2423 SW 147TH AVENUE  
SUITE 259  
MIAMI, FL 331854082

**New Mailing Address:**

**FEI Number:** 80-0363294      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

SILVA, ANGEL  
2423 SW 147TH AVENUE  
SUITE 259  
MIAMI, FL 331854082 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SILVA, ANGEL  
Address: 2423 SW 147TH AVENUE  
City-St-Zip: MIAMI, FL 331854082

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: ANGEL SILLVA

PD

01/06/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date