

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000000385

Entity Name: C L CLAIMSWATCH, INC.

FILED
Mar 18, 2005
Secretary of State

Current Principal Place of Business:

10211 W SAMPLE RD #110
CORAL SPGS, FL 33065 US

New Principal Place of Business:

5508 NW 106TH DRIVE
CORAL SPRINGS, FL 33076 US

Current Mailing Address:

10211 W SAMPLE RD #110
CORAL SPGS, FL 33065 US

New Mailing Address:

5508 NW 106TH DRIVE
CORAL SPRINGS, FL 33076 US

FEI Number: 65-0365701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEPASQUALE, CINDEE
10211 W SAMPLE RD #110
CORAL SPRGS, FL 33065 US

Name and Address of New Registered Agent:

DEPASQUALE, CINDEE
5508 NW 106TH DRIVE
CORAL SPRINGS, FL 33076 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: CINDEE DEPASQUALE

03/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DEPASQUALE, CINDEE
Address: 10211 W SAMPLE RD #110
City-St-Zip: CORAL SPRINGS, FL 33065

Title: V () Delete
Name: KIRSHNER, LORETTA
Address: 10211 W SAMPLE RD #110
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS (X) Change () Addition
Name: DEPASQUALE, CINDEE
Address: 5508 NW 106TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MRS (X) Change () Addition
Name: KIRSHNER, LORETTA
Address: 5026 NW 95TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CINDEE DEPASQUALE

MS

03/18/2005

Electronic Signature of Signing Officer or Director

Date