2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# P96000028244

Entity Name: THE CLAIMS DOCTOR, INC.

Current Principal Place of Business:

12421 N. FLORIDA VE.
SUITE B-215
TAMPA, FL 33612

New Principal Place of Business:

5640 SW 6TH PLACE
SUITE 800
OCALA, FL 34474

Current Mailing Address:

12421 N. FLORIDA VE.
SUITE B-215
TAMPA, FL 33612

New Mailing Address:

5640 SW 6TH PLACE
SUITE 800
OCALA, FL 34474

FEI Number: 59-3369968 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIAGO, BETSY J
927 NORTHWEST 150TH AVE
OCALA, FL 34482 US

Name and Address of New Registered Agent:

DIAGO, BETSY J
927 NW 150TH AVE
OCALA, FL 34482 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: _____ 04/10/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DIAGO, BETSY J
Address: 927 NORTHWEST 150TH AVE
City-St-Zip: OCALA, FL 34482

Title: STD ( ) Delete
Name: DIAGO, CARLOS A
Address: 927 NORTHWEST 150TH AVE
City-St-Zip: OCALA, FL 34482

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: DIAGO, BETSY J
Address: 927 NW 150TH AVE
City-St-Zip: OCALA, FL 34482

Title: STD (X) Change ( ) Addition
Name: DIAGO, CARLOS A
Address: 927 NW 150TH AVE
City-St-Zip: OCALA, FL 34482

I hereby certify that the information supplied with this filing does not qualify for the 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: BETSY J DIAGO PD 04/10/2006
Electronic Signature of Signing Officer or Director — Date