

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000014546 (0)

1. Corporation Name

A-PROMPT CLAIM, CORP.



DO NOT WRITE IN THIS SPACE

Principal Place of Business % LARITZA GONZALEZ 1800 W. 54TH ST #409 HIALEAH FL 33012		Mailing Address % LARITZA GONZALEZ 1800 W. 54TH ST #409 HIALEAH FL 33012	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 02/12/1997		4. FEI Number 65-0731994	
5. Certificate of Status Desired 8. Election Campaign Financing Trust Fund Contribution		Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees	
6. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.		Yes No	
9. Name and Address of Current Registered Agent GONZALEZ, LARITZA 1800 W. 54TH ST #409 HIALEAH FL 33012		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Sandra B. Mortham		DATE 4/27/98	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
2. President Laritza Gonzalez 1800 W 54th St #409 Hialeah, FL 33012		Change Addition	
3. DELETED		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
4. DELETED		Change Addition	
5. DELETED		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
6. DELETED		Change Addition	
7. DELETED		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
8. DELETED		Change Addition	
9. DELETED		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
10. DELETED		Change Addition	
11. DELETED		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
12. DELETED		Change Addition	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE
Laritza Gonzalez

4/27/98

CR2E034 (10/97)