2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P08000076387

Entity Name: TROPICAL CLAIMS, INC.

Current Principal Place of Business:

15620 PALMETTO LAKE DR.
MIAMI, FL 33157

New Principal Place of Business:

5800 SW 17 STREET
PLANTATION, FL 33317

Current Mailing Address:

15620 PALMETTO LAKE DR.
MIAMI, FL 33157

New Mailing Address:

5800 SW 17 STREET
PLANTATION, FL 33317

FEI Number: 26-3202379 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YEAGER CPA, JOHN F
13200 SW 128 STREET
A 3
MIAMI, FL 33186 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: P ( ) Delete
Name: GOINS, DONALD L
Address: 15620 PALMETTO LAKE DR.
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GOINS, DONALD L
Address: 5800 SW 17 ST
City-St-Zip: PLANTATION, FL 33317

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: DONALD GOINS DIR 04/30/2009
Electronic Signature of Signing Officer or Director Date