

1.) CORPORATION NAME:

DIRECT RESPONSE CLAIMS, INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR
ROBERTO RODRIGUEZ-CANALES
107 FALKIRK COURT
FREDERICKSBURG, VA 22406**

DUE DATE: **10/31/2011**

SCC ID NO: **07153034**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 344 MAPLE AVENUE WEST #230

CITY/ST/ZIP: VIENNA, VA 22180-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	ROBERTO RODRIGUEZ-CANALES			
TITLE:	PRESIDENT			
ADDRESS:	754 WARRENTON ROAD			
	STE 113			
CITY/ST/ZIP/CO:	FREDERICKSBURG, VA 22406-			

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ ROBERTO RODRIGUEZ-CANALES</u>	<u>ROBERTO RODRIGUEZ-CANALES, PRESIDENT</u>	<u>11/4/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.