


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P0000022140	
1. Entity Name S.I.R.O. INC.	

Principal Place of Business 9440 SUNRISE LAKES BLVD. BLDG., 127, CONDO 205 SUNRISE, FL 33322	Mailing Address 9440 SUNRISE LAKES BLVD. BLDG., 127, CONDO 205 SUNRISE, FL 33322
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01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-7382461	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ROSS, ROLLAND
9440 SUNRISE LAKES BLVD.
BLDG., 127, CONDO 205
SUNRISE, FL 33322

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ROSS, ROLLAND 9440 SUNRISE LAKES BLVD. #205 SUNRISE, FL 33322
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ROSS, SIMONNE 9440 SUNRISE LAKES BLVD. #205 SUNRISE, FL 33322
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROSS, ALLEN 9440 SUNRISE LAKES BLVD. #205 SUNRISE, FL 33322
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROSS, DEAN P 10103 N MILITARY TRAIL WEST PALM BEACH, FL 33410
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROSS, STEVE J 4297 ST. HUBERT ST MONTREAL, CANADA, HJ2 5W6
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000098856
03/29/04-80059-013 150.00

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rolland Ross *Rolland Ross* **03/22/2004**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #