

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000101634

FILED  
Feb 28, 2007  
Secretary of State

Entity Name: SIUL RANCH, INC.

**Current Principal Place of Business:**

13221 S.W. 25TH STREET  
MIAMI, FL 33175

**New Principal Place of Business:**

**Current Mailing Address:**

13221 S.W. 25TH STREET  
MIAMI, FL 33175

**New Mailing Address:**

FEI Number: 11-3757401      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOSE M. LUIS, P.A.  
391 S.W. 132ND TERRACE  
NEWBERRY, FL 32669      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: PELLY, RENE L  
Address: 1803 S.W. 103RD PLACE  
City-St-Zip: MIAMI, FL 33165 US

Title: DIR ( ) Delete  
Name: PELLY, RENE L  
Address: 1803 S.W. 103RD PLACE  
City-St-Zip: MIAMI, FL 33165 US

Title: DIR ( ) Delete  
Name: LUIS, RENE  
Address: 6365 COLLINS AVENUE, UNIT NO. 3111  
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: DIR ( ) Delete  
Name: LUIS, CARLOS J  
Address: 8741 S.W. 102ND STREET  
City-St-Zip: MIAMI, FL 33176 US

Title: DIR ( ) Delete  
Name: LUIS, IVETTE M  
Address: 13221 S.W. 25TH STREET  
City-St-Zip: MIAMI, FL 33175 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: IVETTE M. LUIS

DIR

02/28/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date