2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000076370

11671 SW 17TH STREET

PEMBROKE PINES, FL 33020 US

Address: City-St-Zip:

Entity Name: SIGERTRONIC SYSTEMS CORPORATION

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:		
	LYWOOD BLVI DOD, FL 33024		320S FLAMINGO R PEMBROKE PINES		US	
Current Mailing Address:			New Mailing Addr	New Mailing Address:		
	LYWOOD BLVI DOD, FL 33024		320S FLAMINGO R PEMBROKE PINES		US	
FEI Number	: 65-0779429	FEI Number Applied For ()	FEI Number Not Applicable ()	Certifica	ate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:		
6030 HOLI	, ROBERT C LYWOOD BLVI DOD, FL 33024					
	named entity se of Florida.	ubmits this statement for the p	urpose of changing its registe	ered office or r	egistered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Age	nt	Date		
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PTSM () BENNETT, ROB 8240 SW 41ST DAVIE, FL 333	ST	Title: Name: Address: City-St-Zip:	() Change (() Addition	
Title: Name: Address: City-St-Zip:	MUNNINGS, CR 30 NEWTOWN		Title: Name: Address: City-St-Zip:	() Change (() Addition	
Title: Name:	VD () ESQUIVEL, DAV	Delete /ID A MR.	Title: Name:	() Change	() Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: ROBERT BENNETT MR. 04/28/2005