

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 282450

Entity Name: SINIVAD, INCORPORATED

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

4408 EL MAR DRIVE
LAUDERDALE BY THE SEA, FL 33308

New Principal Place of Business:

Current Mailing Address:

4408 EL MAR DRIVE
LAUDERDALE BY THE SEA, FL 33308

New Mailing Address:

FEI Number: 59-1054018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOVAK, PAUL
4900 NORTH OCEAN BLVD-SEA RANCH CLUB C
507
LAUDERDALE BY THE SEA, FL 33308 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: PD () Delete
Name: NOVAK, PAUL,
Address: 4900 NORTH OCEAN BLVD#507-SEA RANCH CLUB
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: D () Delete
Name: NOVAK, BRUCE,
Address: 4060 N.E. 16 TH AVE
City-St-Zip: OAKLAND PARK, FL 33334

Title: STD () Delete
Name: NOVAK, CAROL,
Address: 4900 NORTH OCEAN BLVD#507-SEA RANCH CLUB
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: D () Delete
Name: NOVAK, BRIAN,
Address: 4321 BOUGAINVILLE DRIVE
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: D () Delete
Name: NOVAK, JENNIFER,
Address: 1 CHASE HOLLOW LANE
City-St-Zip: GLASTONBURY, CT 06033

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 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: PAUL NOVAK

PRES

01/15/2009

Electronic Signature of Signing Officer or Director

Date