FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **314590** **(1)**

1. Corporation Name
SISORO, INC.

Principal Place of Business
690 RANGE RD
COCOA FL 32926
US

Mailing Address
220 KING STREET
COCOA FL 32922
US

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 03/10/1967
3a. Date of Last Report: 04/25/1995
4. FEI Number: 59-1209257 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. **Name and Address of Current Registered Agent**

ROWE, MORRIS A
1030 GRAY ROAD
COCOA FL 32926

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	VD	☐ DELETE
NAME	SIGVARTSEN, H C	
STREET ADDRESS	1585 NEWFOUND HARBOR DR	
CITY-ST-ZIP	MERRITT ISLAND, FL 00000	
TITLE	TD	☐ DELETE
NAME	HAID, SUSAN E	
STREET ADDRESS	324 E MERRITT ISLND CSWY	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	PD	☐ DELETE
NAME	ROWE, MORRIS A	
STREET ADDRESS	101 N PLUMOSA STREET	
CITY-ST-ZIP	MERRITT ISLAND, FL 00000	
TITLE	S	☒ DELETE
NAME	ADAMS, DOROTHY E.	
STREET ADDRESS	101 N. PLUMOSA STREET	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	VSTD	☒ Change ☐ Addition
2.2 NAME	Haid, Susan E.	
2.3 STREET ADDRESS	1072 Gray Road	
2.4 CITY-ST-ZIP	Cocoa, FL 32926	
3.1 TITLE	P	☒ Change ☐ Addition
3.2 NAME	Rowe, Morris A.	
3.3 STREET ADDRESS	1030 Gray Rd.	
3.4 CITY-ST-ZIP	Cocoa, FL 32926	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Morris A. Rowe 03/15/96 (407)632-2600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)