

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740208

FILED
Jan 16, 2006
Secretary of State

Entity Name: SIG-AL, INC.

Current Principal Place of Business:

15600 N.W. 42ND AVENUE
MIAMI, FL 33054

New Principal Place of Business:

Current Mailing Address:

15600 N.W. 42ND AVENUE
MIAMI, FL 33054

New Mailing Address:

FEI Number: 59-2614284 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENJAMIN, CHRISTOPHER ESQ.
19 W FLAGLER ST.
STE. 705
MIAMI, FL 33130 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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: HANKERSON, HANK
Address: 20355 NE 34 CT., CONDO 2721
City-St-Zip: AVENTURA, FL 33180

Title: FO () Delete
Name: ALLEN, STANLEY
Address: 1420 SW 104 AVE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VPD () Delete
Name: COAKLEY, AUDLEY
Address: 6930 NW 186 ST
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: BRINSON, WILLIE
Address: 1421 NW 137 AV.
City-St-Zip: MIAMI, FL 33167

Title: PCEO () Delete
Name: HARDEN, PETER
Address: 1955 NE 171 ST
City-St-Zip: OPA LOCKA, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: FO (X) Change () Addition
Name: ALLEN, STANLEY L
Address: 1420 SW 104 AVE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VPD (X) Change () Addition
Name: COAKLEY, AUDLEY
Address: 16789 NW 13TH CRT
City-St-Zip: PEMBROKE PINES, FL 33028

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STANLEY L. ALLEN

FO

01/16/2006

Electronic Signature of Signing Officer or Director

Date