2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # F00000005620 1. Entity Name SIRIUS COMPUTER SOLUTIONS, INC.



FILED Feb 03, 2006 08:00 AM Secretary of State

Principal Place of Business

613 NORTHWEST LOOP 410

STE 1000

SAN ANTONIO, TX 78216

Mailing Address

613 NORTHWEST LOOP 410

STE 1000

SAN ANTONIO, TX 78216



DO NOT WRITE IN THIS SPACE

01032006 No Chg-P CR2E034 (11/05)

4. FEI Number 74-2836721

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NDTE: Registered Agent signature required when reinstaling) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECT	CTORS	T		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NAJIM, HARVEY E 613 NORTHWEST LOOP 410 SAN ANTONIO, TX 78216				U08000417076 62/13/06-80034-806 150.00
Title Name Street address City-St-Zip	STD PEARSON, MARK T 813 NORTHWEST LOOP 410 SAN ANTONIO, TX 78216				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MERTENS, JOE 613 NW LOOP 410 STE 1000 SAN ANTONIO, TX 78216	-		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET AUDRESS CITY-ST-ZIP			·		
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as it 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

NINTED NAME OF SIGNING OFFICER OR DIRECTOR