2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002366

RENO, RONALD E

OMAHA, NE 68122

7277 WORLD COMMUNICATIONS DRIVE

Name:

Address: City-St-Zip:

Entity Name: SITEL CUSTOMER CARE, INC.

FILED Mar 28, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 335 ONTARIO STREET ST. CHATHARINES, ONTARIO, ON L2R 5L3 **Current Mailing Address: New Mailing Address:** 165 LAWRENCE BELL DRIVE BUFFALO, NY 14221 FEI Number: 98-0391878 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition RICH, JR., JAMES P Name: Name: 165 LAWRENCE BELL DRIVE Address: Address: City-St-Zip: WILLIAMSVILLE, NY 14221 City-St-Zip: Title: Title: () Delete () Change () Addition COPELAND, STEVEN A Name: Name: 335 ONTARIO STREET Address: Address: ST. CATHERINES, ON L2R 5L3 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition COPELAND, STEVEN A Name: Name: 335 ONTARIO STREET Address: Address: City-St-Zip: ST. CATHERINES, ON L2R 5L3 City-St-Zip: Title: () Delete Title: () Change () Addition BLINKHORN, KAREN A Name: Name: Address: 165 LAWRENCE BELL DRIVE Address: City-St-Zip: WILLIAMSVILLE, NY 14221 City-St-Zip: Title: Title: () Delete (X) Change () Addition

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

Name:

Address:

City-St-Zip:

JANTZI, CRAIG S

3102 WEST END AVENUE

NASHVILLE, TN 37203

Ρ SIGNATURE: JAMES P. RICH, JR. 03/28/2007