2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006904

Entity Name: SIREN RESOURCES, INC.

FILED Aug 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17757 U.S. HIGHWAY 19 NORTH, BLDG. 2 SUITE 600

CLEARWATER, FL 33764

New Mailing Address: Current Mailing Address:

17757 U.S. HIGHWAY 19 NORTH, BLDG. 2 SUITE 600 CLEARWATER, FL 33764

FEI Number: 20-1944998 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:

BERMAN, RICHARD BERMAN, RICHARD

2101 W. COMMERCIAL BLVD., SUITE 2800 2101 W. COMMERCIAL BLVD., SUITE 2800 FORT LAUDERDALE, FL 33701 FORT LAUDERDALE, FL 33309

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: RICHARD BERMAN 08/10/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

WARREN, JOHN Name: BARBEE, MIKE Name:

17757 U.S. HIGHWAY 19 NORTH, BLDG. 2 17757 U.S. HIGHWAY 19 NORTH, BLDG. 2 Address: Address:

City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33764 US

VCST Title: (X) Change () Addition Title: () Delete **VCST**

Name: JOHNSON, HORTON Name: JOHNSON, HORTON S

111 NORTH ORANGE AVENUE, SUITE 2000 111 NORTH ORANGE AVENUE, SUITE 2000 Address: Address:

ORLANDO, FL 32801 ORLANDO, FL 32801 US City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition COOPER, SHANE ARCHER, ALLEN Name: Name:

17757 U.S. HIGHWAY 19 NORTH, BLDG. 2 111 NORTH ORANGE AVENUE, SUITE 2000 Address: Address:

CLEARWATER, FL 33764 City-St-Zip: ORLANDO, FL 32801 US City-St-Zip:

Title: (X) Delete Title: () Change () Addition

EIGENMANN, CONRAD Name: Name: Address: 1050 MILLER DRIVE Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HORTON S. JOHNSON S 08/10/2006