2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# F06000004694

Entity Name: SICIS NORTH AMERICA, INC.

Current Principal Place of Business:

% FUNARO & CO
ONE PENN PLAZA, SUITE #3515
NEW YORK, NY 10119

New Principal Place of Business:

Current Mailing Address:

% FUNARO & CO
ONE PENN PLAZA, SUITE #3515
NEW YORK, NY 10119

New Mailing Address:

FEI Number: 43-2050327 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PLACUZZI, MAURIZIO
Address: ONE PENN PLAZA, SUITE 3515
City-St-Zip: NEW YORK, NY 10119

Title: VP ( ) Delete
Name: LAPATIN-BLANCO, JUDITH
Address: ONE PENN PLAZA, SUITE 3515
City-St-Zip: NEW YORK, NY 10119

Title: S ( ) Delete
Name: RINGEL, JORDAN E
Address: 600 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022

Title: AS ( ) Delete
Name: BALESTRINO, ROSA
Address: 600 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

SIGNATURE: MAURIZIO PLACUZZI PD 04/24/2007

Electronic Signature of Signing Officer or Director Date