2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000183

FILED May 01, 2008 Secretary of State

Entity Nan	ne: SISLEY A	MERICAS SERVICES INC.				
Current Principal Place of Business:				New Principal Place of Business:		
C/O MR. OLIVER SUREAU, JADE ASSOCIATES 100 NORTH BISCAYNE BOULEVARD, STE 500 MIAMI, FL 33132				1111 BRICKELL AVENUE SUITE 1145 MIAMI, FL 33131 US		
Current Mailing Address:				New Mailing Address:		
	H BISCAYNE	AU, JADE ASSOCIATES BOULEVARD, STE 500				
FEI Number:	20-8167992	FEI Number Applied For ()	FEI Number Not	Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Na				Name and Address of New Registered Agent:		
NATIONAL CORPORATE RESEARCH, LTD., INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 US				JADE ASSOCIATES MIAMI INC 100 N BISCAYNE BLVD SUITE 500 MIAMI, FL 33132 US		
The above in the State		submits this statement for the	purpose of chang	ing its registered	office or registered agent, or both,	
SIGNATURE: OLIVIER SUREAU				05/01/2008		
Electronic Signature of Registered Agent				Date		
		3(2)(b), F.S., the corporation did ng Trust Fund Contribution ().	ot receive the prior	notice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D' ORNANO, PI	NUE SOUTH, SUITE 910	Title: Name: Address City-St-2	:) Change ()Addition	
Title: Name: Address: City-St-Zip:	OPPENHEIM, F	NUE SOUTH, SUITE 910	Title: Name: Address City-St-2	:) Change ()Addition	
Title: Name:	P () NAINTRE, ARN) Delete AUD	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: ARNAUD NAINTRE P 05/01/2008

100 NORTH BISCAYNE BOULEVARD, STE 500

MIAMI, FL 33132

Address: City-St-Zip: