


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 17, 2008 8:00 am**  
**Secretary of State**

04-17-2008 90025 005 \*\*\*150.00

**DOCUMENT # F07000003328**

1. Entity Name  
 SIG FINANCIAL HOLDINGS, INC.



Principal Place of Business 1515 N. FEDERAL HIGHWAY SUITE 300, OFFICE #29 BOCA RATON, FL 33432	Mailing Address 1515 N. FEDERAL HIGHWAY SUITE 300, OFFICE #29 BOCA RATON, FL 33432
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**DO NOT WRITE IN THIS SPACE**

02222008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0061694	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

NESBETH, AUTUMN  
 % SUSQUEHANNE INTERNATIONAL GROUP LLP  
 1515 N. FEDERAL HWY., STE 300, OFFICE 29  
 BOCA RATON, FL 33432

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) 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 DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD YASS, JEFFREY 1515 N. FEDERAL HIGHWAY, STE 300, OFF. #29 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GREENBERG, JOEL 1515 N. FEDERAL HIGHWAY, STE 300, OFF. #29 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SULLIVAN, BRIAN 1515 N. FEDERAL HIGHWAY, STE 300, OFF. #29 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DANTCHIK, ARTHUR 1515 N. FEDERAL HIGHWAY, STE 300, OFF. #29 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOOLEY, MARK 1515 N. FEDERAL HIGHWAY, STE 300, OFF. #29 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENBERG, JOEL 1515 N. FEDERAL HIGHWAY, STE 300, OFF. #29 BOCA RATON, FL 33432

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **Brian Sullivan** 3/24/2008 610617-2600  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #