


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT # F07000003519 1. Entity Name SIG HOLDING FLORIDA BUSINESS CORP.	
---	---

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
--	--

DO NOT WRITE IN THIS SPACE



02222008 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0589513	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**NESBETH, AUTUMN
% SUSQUEBANNA INTERNATIONAL GROUP, LLP
1515 N. FEDERAL HIGHWAY, STE 300 OFF #29
BOCA RATON, FL 33432**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000884890 04/17/08-80062-007 150.00
---	--	--

10. OFFICERS AND DIRECTORS

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

**DO NOT WRITE
IN THIS SPACE**

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 610-617-2600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #