2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003519

Entity Name: SIG HOLDING FLORIDA BUSINESS CORP.

FILED Mar 04, 2009 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
1515 N. FEDERAL HIGHWAY SUITE 300, OFFICE #29 BOCA RATON, FL 33432							
Current Mailing Address:				New Mailing Address:			
1515 N. FEDERAL HIGHWAY SUITE 300, OFFICE #29 BOCA RATON, FL 33432							
FEI Number:	01-0589513	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
NESBETH, AUTUMN % SUSQUEBANNA INTERNATIONAL GROUP, LLP 1515 N. FEDERAL HIGHWAY, STE 300 OFF #29 BOCA RATON, FL 33432 US				NESBETH, AUTUMN % SUSQUEHANNA INTERNATIONAL GROUP, LLP 1515 N. FEDERAL HIGHWAY, STE 300 OFF #29 BOCA RATON, FL 33432 US			
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:				03/04/2009			
	Electronic	Signature of Registered Ager	nt			Date	
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	YASS, JEFFREY	L HIGHWAY, SUITE 300 OFF #29		Title: Name: Address: City-St-Zip:		(X) Change () Addition REY /ENUE, SUITE 220 /YD, PA 19004	
Title: Name: Address: City-St-Zip:	GREENBERG, J	L HIGHWAY, SUITE 300 OFF #29		Title: Name: Address: City-St-Zip:		(X) Change () Addition G, JOEL /ENUE, SUITE 220 /YD, PA 19004	
Title: Name: Address: City-St-Zip:	SULLIVAN, BRIA	L HIGHWAY, SUITE 300 OFF #29		Title: Name: Address: City-St-Zip:		(X) Change () Addition ARTHUR /ENUE, SUITE 220 /YD, PA 19004	
Title: Name: Address: City-St-Zip:	DANTCHIK, ARTI	L HIGHWAY, SUITE 300 OFF #29		Title: Name: Address: City-St-Zip:		(X) Change ()Addition ARK /ENUE, SUITE 220 /YD, PA 19004	
Title: Name: Address: City-St-Zip:	DOOLEY, MARK	L HIGHWAY, SUITE 300 OFF #29		Title: Name: Address: City-St-Zip:		(X) Change()Addition BRIAN /ENUE, SUITE 220 /YD, PA 19004	
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:		() Change (X) Addition G, TODD /ENUE, SUITE 220 /YD. PA. 19004	

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.

SIGNATURE: SULLIVAN, BRIAN T 03/04/2009