

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004176

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: SIGNIUS INVESTMENT CORPORATION

## Current Principal Place of Business:

13155 S.W. 132 AVE.  
100  
MIAMI, FL 33186

## New Principal Place of Business:

## Current Mailing Address:

3088 RTE 27 SUITE 8  
KENDALL PARK, NJ 08824

## New Mailing Address:

FEI Number: 22-3707105

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEON, JOSUE  
13155 S.W. 132 AVE. STE. 100  
MIAMI, FL 33186 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: CP ( ) Delete  
Name: PUDLES, GARY  
Address: 345 WITHERSPOON ST  
City-St-Zip: PRINCETON, NJ 08542

Title: VCVP ( ) Delete  
Name: ROBERTSHAW, WILLIAM  
Address: 345 WITHERSPOON ST  
City-St-Zip: PRINCETON, NJ 08542

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change ( ) Addition  
Name: PUDLES, GARY  
Address: 2325 MARYLAND RD. SUITE 210  
City-St-Zip: WILLOW GROVE, PA 19090

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

Title: TREA ( ) Change (X) Addition  
Name: ZAR, ALAN N  
Address: 345 WITHERSPOON ST  
City-St-Zip: PRINCETON, NJ 08542

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: ALAN N. ZAR

TREA

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date