

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000003795 (0)

1. Corporation Name
SIRTI LIMITED CORP.

Principal Place of Business

~~4 AULTMORE KINGWOOD ROAD~~
5907-D HAMPTON OAKS PKWY
TAMPA FL 33610
US

Mailing Address

~~4 AULTMORE KINGWOOD ROAD~~
5907 D HAMPTON OAKS PKWY
TAMPA FL 33610-9577
US

2. Principal Place of Business

21 5907 C HAMPTON OAKS PKWY
Suite, Apt. #, etc.

22

City & State
23 TAMPA, FLORIDA

Zip Country
24 33610 USA

2a. Mailing Address

26 5907 C HAMPTON OAKS PKWY
Suite, Apt. #, etc.

27

City & State
28 TAMPA, FLORIDA

Zip Country
29 33610 USA

3. Date Incorporated or Qualified
08/07/1995

3a. Date of Last Report
04/02/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD.
1406 HAYS STREET #2
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D BERTONE, FRANCO
STREET ADDRESS STRADA AL LAGO N 3, 20090 SAN FELICE
CITY-ST-ZIP MILANO, ITALY

TITLE ☐ DELETE
NAME D BERGONZI, FLAVIO
STREET ADDRESS VIA DELLE RINENBRANZE DI GRECO 55
CITY-ST-ZIP 20125 MILANO ITALY

TITLE ☐ DELETE
NAME D GIOVANI, FRANCO
STREET ADDRESS VIA FRANCESCO BARACCA 18, 20094 CORSICO
CITY-ST-ZIP MILANO, ITALY

TITLE ☒ DELETE
NAME D LONGOBARDI, ENZO
STREET ADDRESS VIA LIPPI FILIPPINO 12
CITY-ST-ZIP 20131 MILANO ITALY

TITLE ☐ DELETE
NAME D ABBIATI, LUIGI
STREET ADDRESS VIA CUFRA, 38
CITY-ST-ZIP 20100 MILANO, ITALY

TITLE ☐ DELETE
NAME S TRUSEC LIMITED
STREET ADDRESS 35 BASINGHALL STREET
CITY-ST-ZIP LONDON EC2V 5DB, ENGLAND

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME D BERTONE, FRANCO
1.3 STREET ADDRESS S LINDEN PARK ROAD
1.4 CITY-ST-ZIP TONBRIDGE WELLS, KENT TN2 5QL, UK

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME D LOMBARDI, GIOVANNI
4.3 STREET ADDRESS VIA VENEZIA NO1, CASSINA DE PECCHI
4.4 CITY-ST-ZIP 20060, MILAN, ITALY

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

[Signature]

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