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

P**RO**FIT 'CORP**O**RATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G51068

FILED Oct 05 1998 8:00am Secretary of State

SIENA CORP., a Florida corporation				
Principal Place of Business Mailing Address				
1581	Brickell Avenue, Sui	to 1208		
Miami, FL 33129				DO NOT WRITE IN THI S S PACE
Licente	, 12 33127			3. Date Incorporated or Qualified 7-25-1983
2 Principal F	Place of Business	2a. Mailing Address		4. FEI Number Applied For
···· 0102 22 4 22 4 2		26 (Same as 2)		59–2363614 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		69.75 A 4.00
22		27		5. Certificate of Status Desired Fee Regulred
City & State		City & State		Election Campaign Financing \$5.00 May Be
	n, FL	28		Trust Fund Contribution Added to Fees
Zip 33327	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 33327	25 USA 9. Name and Address of Current	Penistered Agent	30	Personal Property Tax due June 30. Yes X No 10. Name and Address of New Registered Agent
	g, mains and reduces of culture	Hallatolan Wallt	81 Name	
Rober	t C. McClymonds			
7900 Red Road, Suite 25			82 Stree	t Address (P.O. Box Number is Not Acceptable)
	Miami, FL 33143		83	
Double	144111, 111 33143		1	
			84 City	FL B5 Zip Code
office or i	to t he provisions of Sections 607.0502 regi ste red agent, or both, in the State c im fam iliar with, and accept the obligat	of Florida. Such change was	authorized by the co	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature typed or printed name of registered agent	and title it armicable (NO)	If: Registered Agent signatu	rie required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE	Change Addition
NAME	Kokin, Alejandro		1.2 NAME	
STREET ADDRESS	2437 Eagle Run Way		1.3 STREET ADDRESS	
CITY-ST-ZIP	Weston, FL 33327		1.4 CITY-ST-ZIP	
TITLE	VSD	☐X DELETE	2.1 TITLE	Change Addition
NAME	K o kin, Todor		2.2 NAME	
STREET ADDRESS	1581 Brickell Ave.,	#1208	2.3 STREET ADDRESS	
CHY-ST-ZIF	Miemi, FL 33129	DELETE	2. 4 CITY- ST-ZIP	
TITLE	V Vindiah Missala	☐ DETE 4E	3 1 TITLE	Change Addition
NAME STREET ADDRESS	Landieh, Micaela		3 2 NAME	
CITY-ST-ZIP	18 Whitney Circle Glen Cove, NY		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	1
TITLE	aten rose, MI	DELETE	4.1 TITLE	Ctrange Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	1111
CITY-\$1-ZIP			4.4 CITY-ST-ZIP	11143
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS	•		5.3 STREET ADDRESS	
CITY-S1-ZIP			5.4 C(1)Y - S1 - Z(P	
THLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	7000265631 Change Claddillon -10/06/9801011024
STREET ADDRESS			6.3 STREET ADDRESS	***550,00
CITY-ST-ZIP	cartily that the information assessing with	this films does not a satisfic	6.4 CITY - ST - ZIP	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutos. 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 precise 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 or on an attacking this han address.				