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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

K58263

1. Entity Name

CIGMA METALS CORPORATION



FILED Apr 30, 2003 8:00 am Secretary of State

04-30-2003 90097 037 ***150.00

Principal Place of Business 1060 ALBERNI STREET., SUITE 1505 VANCOUVER B.C. CANADA V6E4K2		Mailing Address 1060 Alberni Street Suite 1505 VANCOUVER B.C. CANADA V6E4K2		
2. Principal Place of Business		3. Mailing Address PO Box 7352	9	T (SOURCE) ARE BOUND HOUR MAND AND THE BURN BURN BURN BURN BURN BURN BURN BURN
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & Stat	е	City & State VANCOUVER		4. FEI Number 98-0203244 Applied For Not Applicable
Zip	Country	VGE 4L9	Country CANADA	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current I			7. Name and Address of New Registered Agent
1 THE LAND	CDIO D		Name	
LITTMAN,	104TH ST., STE 210		Street Addr	ess (P.O. Box Number is Not Acceptable)
MIAMI FL	·			
MINMIT	33 190			
			City	Zip Code
	named entity submits this statement for ions of registered agent.	the purpose of changing it	s registered office or reg	gistered agent, or both, in the State of Florida. I am familiar with, and accept
the oblight	ions of registered agent.			
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NO	TE: Registered Agent signature re	equired when reinstating) DATE
E	ILE NOW!!! FEE IS \$150.00	_ 		
	May 1, 2003 Fee will be \$550.00			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
	Payable to Florida Department of	State		Trust Fund Contribution.
10.	OFFICERS AND (DIRECTORS	11,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS	DE SEGURA, AGUSTIN G 1505-1060 ALBERNI STREET		NAME STREET ADDRESS	
CITY-ST-ZIP	CANADA V6E4K2		CITY-ST-ZIP	
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	LACASA, JORGE L	L Delete	NAME	_ onlings _ realisti
STREET ADDRESS	1505-1060 ALBERNI STREET		STREET ADDRESS	
CITY-ST-ZIP	CANADA V6E4K2	<u>·</u>	CITY-ST-ZIP	
TITLE	CS -	☐ Delete	TITLE	Change
NAME	RICHARDSON, CAMERON A		NAME	
STREET ADDRESS CITY-ST-ZIP	2-238 WEST 4TH STREET CANADA V7M1H7		STREET ADDRESS CITY-ST-ZIP	
TITLE	CANADA V/MIH/	 ☐ Delete		☐ Change ☐ Addition
NAME		r Delete	TITLE NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME PARETT A DEDUCTOR			NAME	}
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	}
TITLE			TITLE	☐ Change ☐ Addition
NAME		☐ Delete	NAME	· Change Ly Addition
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

12. I 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

out 27,2003