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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L33572

SIGI INVESTMENTS, INC.

	· ·								
Principal Place of Business Mailing Address							1498 HIBI BIBII BI		ibil digil isal
?			30 NW 54TH ST						
2200 MUSEUM TOWER. 150 W FLAGLER ST 2200 MUSEUM TOWER. 15) W FLAGLE	R ST	50 1107 14/5		OBACE		
MIAMI FL 33142 MIAMI FL 33142					DO NOT WRITE IN THIS SPACE				
US	•	US				3. Date Incorporated or Qualifed	ļ	•	
	-		A 10 A bd			11/30/1989			-lind Fan
—	ace of Business	<u> </u>	Mailing Address			4. FEI Number		<u> </u>	olied For Applicable
21	4 -1-	26	Suite, Apt. #, etc.			65-0194926		\$8.75 A	
Suite, Apt.	#, etc.	-	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Fee Red	
22 City & State	<u> </u>	27	City & State			6. Election Campaign Financing		\$5.00	
23	•	28	L.,			Trust Fund Contribution		Added to	- 1
Zip	Country Zip		Zip	Country		8. This corporation owes the cur	rent year Int	angible	
24	25 29		30		Personal Property Tax.				
<u></u> 1	9. Name and Address of Curre					10. Name and Address of New	Registered	Agent	
				81	Name	WA MIRO			1
FREED, OWEN S.					Stroot Add	dress (P.O. Box Number is Not Accep	table		
2200 MUSEUM TOWER				82	373	30 NU 54 5	37	•	
150 W FLAGLER ST				83					
MAIM	AI FL 33130		•	0.4	C3.		·	OS Zin C	ode
	•			84	YM / A	M i	FL	85 35	42
11. Pursuant	to the provisions of Sections 607.05	02 and 60	07.1508, Florida Statute	s, the abov	e-named cor	rporation submits this statement for the	purpose of	changing its	registered
office or re	egistered agent, or both, in the State on familiar with and accept the oblig	of Florid	la, Such change was at Section 607.0505. Flor	uthorized by rida Statutes	the corporation	tion's board of directors. I hereby acce	pt the appoin	ilment as reg	pistered
	Lh Vari 4 Va) A	/)				3/3(5/9 <i>9</i>	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title	f applicable. (NOTE:	Registered Age	nt signature requi	ired when reinstating)	DATE		
12.	OFFICERS A	ND DIRE		13.		ADDITIONS/CHANGES TO O	FFICERS AN		
TITLE	AS `		☐ DELETÉ	1.1 TITLE				☐ Change	Addition
NAME	freed, owen s.			1.2 NAME		* .			}
STREET ADDRESS	150 W FLAGLER ST			1.3 STREE	TADORESS				}
CITY-\$T-ZIP	MIAMI FL			1.4 CITY-	ST-ZIP			<u> </u>	F1 4 1 1/2
m.e	PD		☐ DELETE	2.1 TITLE	-			☐ Change	Addition
NAME	FEBRES-CORDERO, SIRO H.			2.2 NAME					1
STREET ADDRESS	3730 NW 54 ST			2.3 STREE	TADDRESS				[
CITY-ST-ZIP	MIAMI FL	-		. 2.4 CITY-	ST-ZIP				
TITLE	VD		☐ DELETE	3.1 TITLE				Change	Addition
NAME	FEBRES-CORDERO, SR., S.			3.2 NAME					ļ
STREET ADDRESS	3730 NW 54 ST.			3.3 STREE	TADDRESS				•
CITY-ST-ZIP	MIAMI FL		- 	3.4. CITY-	ST-ZIP			~ 	
TITLE	SD		☐ DELETE	4.1 TITLE				☐ Change	☐ Addition
NAME :	MIRO, SILVIA			4. 2 NAME					
STREET ADDRESS	3730 NW 54 ST.		•	4.3 STREE	TADDRESS				
CITY-ST-ZIP	MIAMI FL			4.4 CITY-5	ST-ZIP				
TITLE			☐ DELETE	5.1 TITLE		·		☐ Change	☐ Addition
NAME				5.2 NAME				•	
STREET ADDRESS					TADDRESS			•	
CITY-ST-ZIP				5.4 CITY-5	ST-ZIP				
TITLE			☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME	. A: 47			6.2 NAME					
STREET ADDRESS				■ 6.3 STREE	TADDRESS				

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 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 cha h an address, with all other like empowered

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

305-638-1720