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FILED
Mar 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # L68221 (5)
 1. Corporation Name
SIRI FINANCIAL CORP.



Principal Place of Business: **CONGRESS CORP PLAZA #1 945 CLINT MOORE RD - SUITE 100 BOCA RATON FL 33487 US**
 Mailing Address: **CONGRESS CORP PLAZA #1 945 CLINT MOORE RD - SUITE 100 BOCA RATON FL 33487-2802 US**

2. Principal Place of Business: **21 945 Clint Moore Road Suite, Apt. #, etc. 22 Suite 100 City & State 23 Boca Raton, FL Zip Country 24 33487 25 US**
 2a. Mailing Address: **26 945 Clint Moore Road Suite, Apt. #, etc. 27 Suite 100 City & State 28 Boca Raton, FL Zip Country 29 33487 30 US**

3. Date Incorporated or Qualified: **04/26/1990** 3a. Date of Last Report: **03/18/1996**
 4. FEI Number: **65-0196459** 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

**HOLLANDER, BRUCE L.
 5555 HOLLYWOOD BLVD #200
 HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent
 81 Name: **BRUCE L. HOLLANDER**
 82 Street Address (P.O. Box Number is Not Acceptable): **901 South State Road 7, PH-C**
 83 City: **Hollywood**
 84 State: **FL** 85 Zip Code: **33023**

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, 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 607.0506, Florida Statutes.

SIGNATURE: *Bruce L. Hollander* **Bruce L. Hollander** **March 13, 1997**
Signature, typed or printed name of registered agent and Florida Statute (607.0506) Registered Agent's signature required when reappointing (DATE)

12. OFFICERS AND DIRECTORS

TITLE	DPS	<input type="checkbox"/> DELETE
NAME	WEINTRAUB, BURT	
STREET ADDRESS	945 CLINT MOORE RD, STE 100	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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, or on an attachment with an address.

SIGNATURE: *Bruce L. Hollander* *Burt Weintraub* *John H. ...*

CR2E034 (9/96)