2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M54106

FILED May 23, 2007 Secretary of State

Entity Name: SIGMA CONSTRUCTION & ENGINEERING, CORP.

urrent P	rincipal Place	OT BUSINESS:	New Principal Place	of Business:
155 S W IIAMI, FL				
urrent N	lailing Address	::	New Mailing Addres	s:
155 S W IIAMI, FL				
El Number	: 59-2828067	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	l Address of Cu	ırrent Registered Agent:	Name and Address of	of New Registered Agent:
IOREJON 155 S W				
IAMI, FL	33165 US			
IAMI, FL he above	33165 US	ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
IAMI, FL he above	33165 US named entity so e of Florida.	ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
IAMI, FL ne above the State	33165 US named entity si e of Florida. RE:	ubmits this statement for the p		ed office or registered agent, or both, Date
IAMI, FL ne above the State GNATUI accordan	anamed entity sign of Florida. RE: Electronic ce with s. 607.193	c Signature of Registered Ago (2)(b), F.S., the corporation did no	ent	
ilAMI, FL he above the State IGNATUI accordan ection Cai	anamed entity sign of Florida. RE: Electronic ce with s. 607.193	c Signature of Registered Ago (2)(b), F.S., the corporation did no Trust Fund Contribution ().	ent ot receive the prior notice.	
IAMI, FL ne above the State GNATUI accordan ection Car FFICER: le: lme: ldress:	anamed entity sign of Florida. RE: Electronic ce with s. 607.193 mpaign Financing S AND DIRECT	c Signature of Registered Agr (2)(b), F.S., the corporation did no Trust Fund Contribution (). CORS:	ent ot receive the prior notice.	Date
ilAMI, FL he above the State IGNATUI accordan ection Cai	anamed entity size of Florida. RE: Electronic ce with s. 607.193 mpaign Financing S AND DIRECT PDS ()I MOREJON, LUIS 3155 S W 99 CT MIAMI, FL 3316	c Signature of Registered Agr (2)(b), F.S., the corporation did no Trust Fund Contribution (). FORS: Delete	ent ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GILDA MOREJON VP 05/23/2007