

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010073

FILED
Apr 30, 2008
Secretary of State

Entity Name: SIBERT, INC.

Current Principal Place of Business:

1219 BAYCOURT ISLE
GREENACRES, FL 33413

New Principal Place of Business:

Current Mailing Address:

1219 BAYCOURT ISLE
GREENACRES, FL 33413

New Mailing Address:

FEI Number: 26-0893366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, PASKINEL
1219 BAYCOURT ISLE
GREENACRES, FL 33413 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: THOMAS, PASKINEL
Address: 1219 BAYCOURT ISLE
City-St-Zip: GREENACRES, FL 33413

Title: D () Delete
Name: ESTIME, NURVAH
Address: 506 SUPERIOR PLACE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D () Delete
Name: LINDOR, DAVID
Address: 16540 FOREST LAKE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PASKINEL THOMAS

CEO

04/30/2008

Electronic Signature of Signing Officer or Director

Date