

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90008 014 ***150.00

DOCUMENT # P00000109592

1. Entity Name
SIGIL CONSULTING, INC.

Principal Place of Business
~~201 SEVILLA AVENUE~~
~~302~~
~~CORAL GABLES FL 33134~~

Mailing Address
~~11125 SHADYBROOK DRIVE~~
~~TAMPA FL 33625~~ SUITE 110
7950 WEST FLAGLER ST.
MIAMI, FL 33144



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3698097** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
HERNANDEZ, NELSON
~~11125 SHADYBROOK DRIVE~~
~~TAMPA FL 33625~~

7. Name and Address of New Registered Agent
 Name: **HERNANDEZ, NELSON**
 Street Address (P.O. Box Number is Not Acceptable): **7950 WEST FLAGLER ST SUITE 110**
 City: **MIAMI, FL 33144**

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT HERNANDEZ, NELSON 11125 SHADYBROOK DRIVE TAMPA FL 33625	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT HERNANDEZ, NELSON A. 7950 WEST FLAGLER ST, STE 104 MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ECKARDT, LUIS A 2145 CALIFORNIA STREET #101 WASHINGTON DC 20008	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COUTO, MIGUEL 7950 WEST FLAGLER ST, STE 104 MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MENDEZ, PATRICIA 11125 SHADYBROOK DRIVE TAMPA FL 33625	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MENDEZ, OLGA P. 7950 WEST FLAGLER ST, STE 104 MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	305-265-3423

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **01-29-02**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E034 (9/01)