2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

DOCUMENT# P00000114638

Entity Name: SICONT ENTERPRISES OF AMERICA, INC.

Current Principal Place of Business:

14013 ISLAMORADA DR.
ORLANDO, FL 32837

New Principal Place of Business:

13584 TURTLE MARSH LOOP NO. 115
ORLANDO, FL 32837

Current Mailing Address:

14013 ISLAMORADA DR.
ORLANDO, FL 32837

New Mailing Address:

13584 TURTLE MARSH LOOP NO. 115
ORLANDO, FL 32837

FEI Number: 59-3694270 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DESIREE, TORRES
14013 ISLAMORADA DR.
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

DESIREE, TORRES
13584 TURTLE MARSH LOOP NO. 115
ORLANDO, FL 32837 US

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: DESIREE TORRES 04/29/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TORRES, DESIREE
Address: 14013 ISLAMORADA DR.
City-St-Zip: ORLANDO, FL 32837

Title: SVD ( ) Delete
Name: TORRES, LUIS E
Address: 14013 ISLAMORADA DR.
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TORRES, DESIREE
Address: 13584 TURTLE MARSH LOOP NO. 115
City-St-Zip: ORLANDO, FL 32837

Title: SVD (X) Change ( ) Addition
Name: TORRES, LUIS E
Address: 13584 TURTLE MARSH LOOP NO. 115
City-St-Zip: ORLANDO, FL 32837

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: DESIREE TORRES PD 04/29/2007
Electronic Signature of Signing Officer or Director Date