

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000117765

Entity Name: SIS ACCOUNTING SERVICE, INC.

FILED  
Jan 08, 2009  
Secretary of State

## Current Principal Place of Business:

7105 W 12TH AVE  
#5  
HIALEAH, FL 33014

## New Principal Place of Business:

## Current Mailing Address:

7105 W 12TH AVE  
#5  
HIALEAH, FL 33014

## New Mailing Address:

FEI Number: 65-1065916      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PACHECO, CAROLINA  
855 WEST 79TH STREET  
HIALEAH, FL 33014      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PACHECO, CAROLINA  
Address: 855 WEST 79TH STREET  
City-St-Zip: HIALEAH, FL 33014 VP

Title: VPD ( ) Delete  
Name: CUAREZMA, MARIA  
Address: 937 WEST 80 PLACE  
City-St-Zip: HIALEAH, FL 33014

Title: VP ( ) Delete  
Name: SOLORZANO, FRANCISCO J JR  
Address: 12254 SW 27 STREET  
City-St-Zip: MIRAMAR, FL 33025

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

SIGNATURE: CAROLINA PACHECO

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

01/08/2009

\_\_\_\_\_  
Date