

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034190

Entity Name: SIGEST U.S.A., INC.

FILED  
Mar 28, 2005  
Secretary of State

**Current Principal Place of Business:**

235 FT. LAUDERDALE BEACH BLVD.  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

235 FT. LAUDERDALE BEACH BLVD.  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 65-1093650

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BALDI, LEONARDO  
519 ANTIOCH AVE.  
FORT LAUDERDALE, FL 33316 US

**Name and Address of New Registered Agent:**

BALDI, LEONARDO  
235 FT. LAUDERDALE BEACH BLVD.  
FORT LAUDERDALE, FL 33316 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/28/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BALDI, LEONARDO  
Address: 519 ANTIOCH AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: S ( ) Delete  
Name: FICCA, SILVIA  
Address: 519 ANTIOCH AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33316

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BALDI, LEONARDO  
Address: 235 FT. LAUDERDALE BEACH BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: S (X) Change ( ) Addition  
Name: FICCA, SILVIA  
Address: 235 FT. LAUDERDALE BEACH BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LEONARDO BALDI

Electronic Signature of Signing Officer or Director

P

03/28/2005

Date