

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000066129

Entity Name: SIATZ EDUCATORS INC.

FILED
Apr 17, 2005
Secretary of State

Current Principal Place of Business:

15830 NW 14TH ROAD
PEMBROKE PINES, FL 33025

New Principal Place of Business:

15830 NW 14TH ROAD
PEMBROKE PINES, FL 33028

Current Mailing Address:

15830 NW 14TH ROAD
PEMBROKE PINES, FL 33025

New Mailing Address:

15830 NW 14TH ROAD
PEMBROKE PINES, FL 33028

FEI Number: 56-2372317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIOTT, MICHELLE
15830 NW 14TH ROAD
PEMBROKE PINES, FL 33025 US

Name and Address of New Registered Agent:

ELLIOTT, MICHELLE
15820 NW 14TH ROAD
PEMBROKE PINES, FL 33028 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:

04/17/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WAITE-THOMAS, SIMONE
Address: 15830 NW 14TH ROAD
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D () Delete
Name: THOMAS, IAN
Address: 15830 NW 14TH ROAD
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WAITE-THOMAS, SIMONE
Address: 15830 NW 14TH ROAD
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D (X) Change () Addition
Name: THOMAS, IAN
Address: 15830 NW 14TH ROAD
City-St-Zip: PEMBROKE PINES, FL 33028

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: IAN THOMAS

VP

04/17/2005

Electronic Signature of Signing Officer or Director

Date