2008 FOR PROFIT CORPORATION **ANNUAL RÉPORT**

DOCUMENT # P05000066338

SI CHANGE CONSULTING, INC.



FILED Mar 03, 2008 08:00 A Secretary of State

Principal Place of Business

2332 GALIANO ST. CORAL GABLES, FL 33134 Mailing Address

2332 GALIANO ST.

CORAL GABLES, FL 33134



DO NOT WRITE IN THIS SPACE

02072008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-2785513 Applied For Not Applicab

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANCEZ-MEDINA, ROLAND JR. 2333 PONCE DE LEON BLVD., SUITE 302 CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the ptions of registered agent.	ourpose of changing its registered of	fice or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and acce	
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Ager	nt signatur	required when rainstating)	DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees		\$5.00 May Be		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT BERMAN, GARY L 2332 GALIANO ST CORAL GABLES, FL 33134			V00000845593		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERMAN, VALERIE S 2332 GALIANO ST CORA GABLES, FL 33134			03/17/08-80002-003 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 in the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver of the receiver