## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000071281

Entity Name: SIERRA GLOBAL. INC

FILED Feb 01, 2006 Secretary of State

Entity Nan	ne: SIERRAG	BLOBAL, INC.				
Current Pr	incipal Place	of Business:	New Princ	New Principal Place of Business:		
4830 N.W. 43RD STREET UNIT E-72 GAINESVILLE, FL 32606			SUITE 209	818 WEST UNIVERSITY AVENUE SUITE 209 GAINESVILLE, FL 32601		
Current Ma	ailing Addres	s:	New Mailii	New Mailing Address:		
P. O. BOX GAINESVIL	2866 .LE, FL 32602		SUITE 209	「UNIVERSITY AVENUE ) LLE, FL 32601		
FEI Number:	20-3087950	FEI Number Applied For ( )	FEI Number Not Appli	licable ( ) Certificate of Status Desired (X)		
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
UNIT E-72 GAINESVIL	43RD STREET LE, FL 32606 named entity s	US	pose of changing it	its registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electron	ic Signature of Registered Agent	İ	Date		
Election Carr	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS	AND DIRECT	rors:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name:	BYRNES, BRIAN 818 WEST UNIV GAINESVILLE, F	ERSITY AVE.	Title: Name: Address: City-St-Zip: Title: Name:	D, P (X) Change ( ) Addition KRANZ, DAVID 818 WEST UNIVERSITY AVE., SUITE 209 GAINESVILLE, FL 32601  D ( ) Change (X) Addition MCGUINNESS, RYAN		
Address: City-St-Zip:			Address: City-St-Zip:	818 WEST UNIVERSITY AVE., SUITE 209 GAINESVILLE, FL 32601		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	VP ( ) Change (X) Addition KRANZ, DAVID 818 WEST UNIVERSITY AVE., SUITE 209 GAINESVILLE, FL 32601		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	S, T ( ) Change (X) Addition KRANZ, DAVID 818 WEST UNIVERSITY AVE., SUITE 209 GAINESVILLE, FL 32601		

I hereby certify that the information supplied with this filing does not qualify for the 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.

ATURE: DAVID KRANZ	Р	02/01/2006
	Р	02/01/2006