

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000030339

Entity Name: SIDLEXTIVE, INC.

FILED
Mar 16, 2007
Secretary of State

Current Principal Place of Business:

11421 SW 203 TERRACE
MIAMI, FL 33189 US

New Principal Place of Business:

Current Mailing Address:

11421 SW 203 TERRACE
MIAMI, FL 33189 US

New Mailing Address:

FEI Number: 76-0819603

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: D () Delete
Name: MORRIS, ULYSSES S
Address: 11421 SW 203 TERRACE
City-St-Zip: MIAMI, FL 33189 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORRIS, ULYSSES S
Address: 11421 SW 203 TERRACE
City-St-Zip: MIAMI, FL 33189 US

Title: V () Change (X) Addition
Name: BETTY, EVERETT
Address: 5831 SW 58 TERR
City-St-Zip: MIAMI, FL 33143

Title: D () Change (X) Addition
Name: ARJEWUS, WILLIS L
Address: 11256 SW 189 TERR
City-St-Zip: MIAMI, FL 33157

Title: D () Change (X) Addition
Name: MARY, MORRIS
Address: 11421 SW 203 TERR
City-St-Zip: MIAMI, FL 33189

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.

SIGNATURE: ULYSSES S MORRIS

P

03/16/2007

Electronic Signature of Signing Officer or Director

_____ Date