

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000106868

FILED
Apr 09, 2007
Secretary of State

Entity Name: SIERRA & COLIMODIO INVESTMENT COMPANY

Current Principal Place of Business:

350 SEMINOLE BLVD
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

140 CONCH KEY WAY
SANFORD, FL 32771

New Mailing Address:

350 SEMINOLE BLVD
SANFORD, FL 32771

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIVERSIFIED BUSINESS TECHNOLOGIES, LLC
1820 SNOOK DRIVE
DELTONA, FL 32738 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: P () Delete
Name: SIERRA, LUIS
Address: 140 CONCH KEY WAY
City-St-Zip: SANFORD, FL 32771

Title: VP () Delete
Name: COLIMODIO, ALFREDO
Address: 5028 HAWKSTONE DRIVE
City-St-Zip: SANFORD, FL 32771

Title: T () Delete
Name: SIERRA, LUIS
Address: 140 CONCH KEY WAY
City-St-Zip: SANFORD, FL 32771

Title: S () Delete
Name: COLIMODIO, ALFREDO
Address: 5028 HAWKSTONE DRIVE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LUIS SIERRA

P

04/09/2007

Electronic Signature of Signing Officer or Director

Date