

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000090172

Entity Name: SISCAD BUSINESS, CORP.

FILED
Jan 24, 2009
Secretary of State

Current Principal Place of Business:

907 ABRAMS BLVD
LEHIGH ACRES, FL 339716420

New Principal Place of Business:

907 DUPLEX B ABRAMS BLVD
LEHIGH ACRES, FL 339716420

Current Mailing Address:

907 ABRAMS BLVD
LEHIGH ACRES, FL 339716420

New Mailing Address:

907 DUPLEX B ABRAMS BLVD
LEHIGH ACRES, FL 339716420

FEI Number: 26-3527863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRIARTE, RICARDO
907 ABRAMS BLVD
LEHIGH ACRES, FL 339716420 US

Name and Address of New Registered Agent:

IRIARTE, RICARDO
907 DUPLEX B ABRAMS BLVD
LEHIGH ACRES, FL 339716420 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: RICARDO IRIARTE

01/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: IRIARTE, IVAN
Address: 907 ABRAMS BLVD
City-St-Zip: LEHIGH ACRES, FL 339716420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: IRIARTE, IVAN
Address: 907 DUPLEX B ABRAMS BLVD
City-St-Zip: LEHIGH ACRES, FL 339716420

I hereby certify that the information supplied with this filing does not qualify 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: IVAN IRIARTE

DPST

01/24/2009

Electronic Signature of Signing Officer or Director

Date