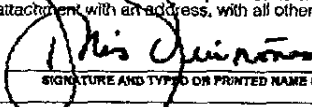


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000029976		
1. Entity Name SIDOR INVESTMENTS INC.		
Principal Place of Business 10841 S.W. 68TH DRIVE MIAMI, FL 33173	Mailing Address 10841 S.W. 68TH DRIVE MIAMI, FL 33173	
DO NOT WRITE IN THIS SPACE		
		 01132006 No Chg-P CRZE034 (11/05)
4. FEI Number 65-0427611		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent DELGADILLO, HERNAN 10841 S.W. 68TH DRIVE MIAMI, FL 33173		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DELGADILLO, HERNAN E 10841 S.W. 68TH DR. MIAMI, FL 33173	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD QUINONES, DORIS 10841 S.W. 68TH DR. MIAMI, FL 33173	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD DELGADILLO, JAIME 20700 SPINNING WHEEL PL GERMANTOWN, MD 20874	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD DE WOLFF, MARIA C CALLE 85 NO. 9-21 APTD #201 BOGOTA, COLOMBIA,	
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 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: 		4/4/06 305-279-5157 Date Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		