## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # **P95000022725** 1. Corporation Name

SIRIO 777, INC.

## May 06, 1999 8:00 am Secretary of State

05-06-1999 90139 046 \*\*\*150.00



	<u></u>								
Principal Place	Mailing Address	ddress							
600 W. HALLANDALE BEACH BLVD #6 P O BOX 1295 HALLANDALE FL 33009 HALLANDALE FL 33008 US						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  03/21/1995			
Principal Place of Business     2a. Mailing Address						4. FEI Number		• Apr	lied For
26						65-0677503		Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired   \$8.75 Additional Fee Required			
City & Stat	9	City & State				6. Election Campaign Trust Fund Contribu	• 11		
Zip 24	Country 25	Zip   Country				This corporation ow Personal Property 1	-	ntangible Yes	ÍΝο
9. Name and Address of Current Registered Agent						10. Name and Addres	s of New Registered	d Agent	<b></b>
SORIA, PEDRO ENRIQUE 600 W HALLANDALE BEACH BLVD SUITE 6				81 Name  82 Street Address (P.O. Box Number is Not Acceptable)					
HALLANDALE FL 33009			83	3					
			84	' '	•		F	_	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut	horized by	/ the o	ned corporation	ation submits this statem s board of directors. I he	nent for the purpose of ereby accept the appo	of changing its regintment as reg	egistered istered
SIGNATURE	Stgnature, typed or printed name of registered age	nt and title if applicable. (NOTE. R	egistered Age	ent signal	ture required w	hen reinstating)	DATE		
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D DELETE		1.1 TITLE	1.1 TITLE			•	Change	☐ Addition
NAME	~		1.2 NAME	1.2 NAME					
			1.3 STREE	ET ADORI	ESS				
CITY-ST-ZIP	HALLANDALE FL 33009	• w ·	1.4 CITY-3	ST-ZIP					
		D OF STE						Change	Addition

TITLE □ DELETE LONG K., ROBERT G 2.2 NAME NAME STREET ADDRESS 600 W. HALLANDALE BEACH BLVD., #6 2.3 STREET ADDRESS HALLANDALE FL 33009 CITY-ST-ZIP 2. 4 CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE TITLE NAME SORIA. PEDRO ENRIQUE 3.2 NAME 600 W HALLANDALE BCH BLVD #6 3.3 STREET ADDRESS STREET ADORESS HALLANDALE FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this fifing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report by supplemental annual 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 of trustee empowered to execute this report as required by Chapter,607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, of on an attachment with an address with all other like empowered.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)