2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED May 02, 2006 8:00 am Secretary of State

DOCUMENT # P9900006539 1. Entity Name SIGI FLOR INC.					05-02-2006 90147 028 ***150.00			
Principal Place of Business Mailing Address					1			
		520 BRICKELL KEY DRI Miami, Fl. 33131	O BRICKELL KEY DRIVE, SUITE 0-305 AMI, FL 33131			0077197		III BRI (C 184)
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01102006	Chg-P	CR2E034 (11/05)	
City & State		City & State		4. FEI Number 65-0908			optied For ot Applicable	
Zip	Country	Zip	Coun	try	5. Certificate of	of Status Desired	S8.75 Add Fee Require	
	6. Name and Address of Curren	t Registered Agent		Nama	7. Name and	Address of New F	Registered Agent	
	, NICHOLAS ŒLL KEY DRIVE, SUITE 0-3 33131		Transplotal Corporate Administration, U.C. Street Administration, U.C. Street Administration, U.C.					
		1		City .	ickell k ami	cey Priv	<u>14 - کسکو</u> چیچ	-305
8. The above named entity submits this settlement 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 orbinted name of registered upont and little if applicable. (NOTE: Registered Agent algorature required when relinatating) DATE.								
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees								
10.	10. OFFICERS AND DIRECTORS				ADDITIONS/	CHANGES TO OFF	FICERS AND DIRECTOR	S IN 11
TITLE	DPS	☐ Delele	TITU				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	MEIZLER, TONY MAZAL 520 BRICKELL KEY DRIVE, SUITE 0-305 MIAMI, FL 33131			E ET ADORESS - SI - ZIP				
TITLE	DV	☐ Delete	TOTAL				☐ Change	☐ Addition
NAME STREET ADDRESS	MEIZLER, ABRAHAM 520 BRICKELL KEY DRIVE, SUITE 0-305			E Et address				
CITY-ST-ZIP	MIAMI, FL 33131			-ST-ZIP				
TITLE	AS Delete				-		☐ Change	Addition
NAME STREET ADDRESS	STANHAM, NICHOLAS 520 BRICKELL KEY DR STE 0-305			E ET ADORESS				
CITY-ST-ZIP	MIAMI, FL 33131			-ST-ZIP				
TIFLE		☐ Detete	TITLE				☐ Change	Addition
NAME STREET ADORESS			MAM BSI 2	E Et address				
CITY-ST-ZIP				-ST-ZIP				
TITLE		☐ Delete	TITL				☐ Change	Addition
NAME STREET ADDRESS			NAM	E Et adoress				
CITY-ST-ZIP				-ST-ZIP				
TITLE		☐ Delete	THU	E			Change	Addition
NAME STREET ADORESS			NAM					
CITY-ST-ZIP				ET ADDRESS -ST-ZIP				
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 1.19, 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.								

NICHOLAS STANHAM 04/10/06 305-374-3800
ME OF SIGNING OFFICER OR DIRECTOR

Date

Divising Phone #