## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P99000087045

City-St-Zip:

FILED Sep 11, 2002 Secretary of State

Entity Nar	me: SI ACQUIS	ITION CORP.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
1401 BRIC SUITE 101 MIAMI, FL							
Current Mailing Address:			New Maili	New Mailing Address:			
1401 BRIC SUITE 101 MIAMI, FL							
FEI Number:		FEI Number Applied For ( )	FEI Number Not App	pplicable (X) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
ONE S.E. 3 28TH FLO	3RD AVENUE	N SERVICES, INC.					
	named entity su e of Florida.	bmits this statement for the p	urpose of changing i	ts register	ed office or registered agent, or	both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent			nt	Date			
		satisfy its Intangible Tax filing requ Trust Fund Contribution ( ).	irement and elects to	do so (X).			
OFFICERS	S AND DIRECT	ORS:	ADDITION	IS/CHANG	SES TO OFFICERS AND DIREC	CTORS:	
Title: Name: Address: City-St-Zip:	DPT () E VINOLY, DANIEZ 445 GRAND BAY KEY BISCAYNE,	DRIVE	Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition NN, ARNOLD DPS KELL AVENUE, SUITE 1010 33131		
Title: Name: Address: City-St-Zip:	DVPS () E JACQUES, GIZLI 1401 BRICKELL MIAMI, FL 3313	AVE STE 1010	Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition GLIKSBERG D KELL AVE STE 1010 33131		
Title: Name: Address:	( )	Pelete	Title: Name: Address:	D BOLATTI, I 1401 BRIO	( ) Change (X) Addition HUGO D KELL AVE. SUITE 1010		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

MIAMI, FL 33131

SIGNATURE: ARNOLD SCHIEMANN **DPS** 09/11/2002