2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000151242

Entity Name: S4E CORP

FILED Sep 06, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
23 NW 330 SUITE 6 GAINESVI	CT ILLE, FL 32607			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
23 NW 33 SUITE 6 GAINESVI	CT ILLE, FL 32607			
FEI Number	: FEI Number Applied For (() FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and	l Address of Current Registered Age	nt: Name and Address o	f New Registered Agent:	
2231 NW :	, ARTURO 51 TERRACE ILLE, FL 32605 US			
	e named entity submits this statement fo	or the purpose of changing its registered	d office or registered agent, or both,	
in the State	e of Florida.	or the purpose of changing its registered	d office or registered agent, or both,	
n the State	e of Florida.		d office or registered agent, or both, Date	
in the State SIGNATUI In accordan	e of Florida. ** RE:	ed Agent n did not receive the prior notice.		
in the State SIGNATUI In accordan Election Cai	e of Florida. RE: Electronic Signature of Registers ice with s. 607.193(2)(b), F.S., the corporation	ed Agent n did not receive the prior notice.).		
in the State SIGNATUI In accordan Election Car OFFICER: Title: Name: Address:	e of Florida. RE: Electronic Signature of Registere ice with s. 607.193(2)(b), F.S., the corporation mpaign Financing Trust Fund Contribution (ed Agent n did not receive the prior notice.).	Date	
in the State SIGNATUI In accordan Election Cai	e of Florida. RE: Electronic Signature of Registers ace with s. 607.193(2)(b), F.S., the corporation impaign Financing Trust Fund Contribution (S AND DIRECTORS: P () Delete SINCLAIR, ARTURO 2231 NW 51 TERRACE	ed Agent n did not receive the prior notice.). ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR	

I hereby certify that the information supplied with this filing does not qualify for the 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: ARTURO SINCLAIR PRES 09/06/2006