2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90038 018 ***158.75

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1. Entity Name
DA SILVA PROPERTIES CORP.

Principal Place of Business
P O BOX 165539
MIAMI, FL 33116-5539

Mailing Address
P O BOX 165539
MIAMI, FL 33116-5539

02042004 Chg-P CR2E034 (10/03)

2. Principal Place of Business
% AGS PROPERTIES CORP.

Suite, Apt. #, etc.
290 N.W. 165 ST. (SUITE M-400)

City & State
MIAMI, FL.

Zip 33169 Country USA

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number 65-1158390 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
GROSSMAN, JEROME
2780 S.W. 37 AVENUE
SUITE 205
MIAMI, FL 33133

7. Name and Address of New Registered Agent
Name GROSSMAN, JEROME
Street Address (P.O. Box Number is Not Acceptable)
290 N.W. 165 TH STREET (SUITE M-400)
City MIAMI FL Zip Code 33169

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 JEROME GROSSMAN 02/05/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DVP	☐ Delete
NAME	DA SILVA, SALUSTIANA	
STREET ADDRESS	2780 S.W. 37 AVENUE, SUITE 205	
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE	DVP	☐ Delete
NAME	DA SILVA, ELIDIA H	
STREET ADDRESS	2780 S.W. 37 AVENUE, SUITE 205	
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE	DVP	☐ Delete
NAME	DA SILVA, ALFREDO	
STREET ADDRESS	2780 S.W. 37 AVE., SUITE 205	
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE	S	☐ Delete
NAME	GROSSMAN, JEROME	
STREET ADDRESS	2780 S.W. 37 AVE., SUITE 205	
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE	DP	☐ Delete
NAME	DA SILVA, ALVARO A	
STREET ADDRESS	2780 SW 37 AVE., STE 204	
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DVP	☒ Change ☐ Addition
NAME	DA SILVA, SALUSTIANO	
STREET ADDRESS	290 N.W. 165 STREET (SUITE M-400)	
CITY-ST-ZIP	MIAMI, FL. 33169	
TITLE	DVP	☒ Change ☐ Addition
NAME	DA SILVA, ELIDIA H	
STREET ADDRESS	290 N.W. 165 STREET (SUITE M-400)	
CITY-ST-ZIP	MIAMI, FL. 33169	
TITLE	DVP	☒ Change ☐ Addition
NAME	DA SILVA, ALFREDO	
STREET ADDRESS	290 N.W. 165 STREET (SUITE M-400)	
CITY-ST-ZIP	MIAMI, FL. 33169	
TITLE	VPS	☒ Change ☐ Addition
NAME	GROSSMAN, JEROME	
STREET ADDRESS	290 N.W. 165 STREET (SUITE M-400)	
CITY-ST-ZIP	MIAMI, FL. 33169	
TITLE	DP	☒ Change ☐ Addition
NAME	DA SILVA, ALVARO A	
STREET ADDRESS	290 N.W. 165 STREET (SUITE M-400)	
CITY-ST-ZIP	MIAMI, FL. 33169	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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: V.P JEROME GROSSMAN 02/05/04 (305)662-6772
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #