## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P02000098861

Entity Name: SILKS & SERVICES, ETC., INC.

FILED Apr 23, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3022 STARMOUNT DRIVE SUITE B VALRICO, FL 33594 **New Mailing Address: Current Mailing Address:** 3022 STARMOUNT DRIVE SUITE B VALRICO, FL 33594 US FEI Number: 13-4213488 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEGAL ZOOM NEVADA, INC. 395 ALHAMBRA CIRCLÉ SUITE 301 CORAL GABLES, FL 33134 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: **PRFS** (X) Change ( ) Addition HAAKE, EVELYN S Name: Name: HAAKE, EVELYN S 3022 STARMOUNT DRIVE, SUITE B 3022 STARMOUNT DRIVE, Address: Address: City-St-Zip: VALRICO, FL 33594 US City-St-Zip: VALRICO, FL 33594 US () Delete Title: ( ) Change (X) Addition Title: Name: Name: HAAKE, EVELYN S 3022 STARMOUNT DRIVE Address: Address: VALRICO, FL 33594 US City-St-Zip: City-St-Zip: ( ) Change (X) Addition Title: () Delete Title: SEC HAAKE, EVELYN S Name: Name: 3022 STARMOUNT DRIVE. Address Address: City-St-Zip: City-St-Zip: VALRICO, FL 33594 US Title: () Delete Title: **EVPS** ( ) Change (X) Addition HILL, DAWN S Name: Name: Address: Address: 807 GLEN OAK AVE. City-St-Zip: City-St-Zip: CLEARWATER, FL 33759 US Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: HAAKE, NANCY L Address: Address: 3022 STARMOUNT DRIVE City-St-Zip: City-St-Zip: VALRICO, FL 33594 US

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.

SIGNATURE: EVELYN S. HAAKE PRES 04/23/2003