

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097866

FILED
Jul 18, 2006
Secretary of State

Entity Name: JOHN SILVA CONSTRUCTION, INC.

Current Principal Place of Business:

1705 BERTHA STREET
KEY WEST, FL 33040 US

New Principal Place of Business:

14507 PINE CONE TRAIL
CLERMONT, FL 34711 US

Current Mailing Address:

1705 BERTHA STREET
KEY WEST, FL 33040 US

New Mailing Address:

14507 PINE CONE TRAIL
CLERMONT, FL 34711 US

FEI Number: 20-1303366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, JOHN M
1705 BERTHA STREET
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

SILVA, JOHN M
14507 PINE CONE TRAIL
CLERMONT, FL 34711 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:

07/18/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SILVA, JOHN M
Address: 1705 BERTHA, STREET
City-St-Zip: KEY WEST, FL 33040 US

Title: SEC () Delete
Name: SILVA, JOHN M
Address: 1705 BERTHA STREET
City-St-Zip: KEY WEST, FL 33040 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SILVA, JOHN M
Address: 14507 PINE CONE TRAIL
City-St-Zip: CLERMONT, FL 34711 US

Title: SEC (X) Change () Addition
Name: SILVA, JOHN M
Address: 14507 PINE CONE TRAIL
City-St-Zip: CLERMONT, FL 34711 US

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: JOHN SILVA

P

07/18/2006

Electronic Signature of Signing Officer or Director

Date