## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P05000126465

1. Entity Name

SILVERBOX HOME INSPECTORS, INC.

FILED Apr 26, 2007 08:00 AM Secretary of State

Principal Place of Business

Maiting Address

6816 S.W. 11TH STREET PEMBROKE PINES, FL 33023 6816 S.W. 11TH STREET PEMBROKE PINES, FL 33023



## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04022007 No Chg-l		CR2E034 (11/05)			
4. FEI Number	<del></del>	·· ·	Applied For		
20-3467	7774	NOTHINYOU	Not Applicable		
5. Certificate of	of Status Desired	N	5 Additional		

6. Name and Address of Current Registered Agent

SALCEDO, ANDERSON 6816 S.W. 11TH STREET PEMBROKE PINES, FL 33023

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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, hyped or printed name of registoffed agent and title of applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  ONE  ONE  ONE  ONE  ONE  ONE  ONE  O							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			ing 🔲	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS		· · · · · · · · · · · · · · · · · · ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P SALCEDO, ANDERSON 6816 S.W. 11TH STREET PEMBROKE PINES, FL. 33023						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS					U00000732153		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					05/09/07-80034-013 150.00		
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.    Industrial							