

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000083276

FILED
Sep 05, 2007
Secretary of State

Entity Name: SILVA'S CARPENTRY, CORP.

Current Principal Place of Business:

3105 NW 3RD AVENUE #2
POMPANO BEACH, FL 33064

New Principal Place of Business:

4 DOGWOOD TRAIL PLACE
OCALA, FL 34472

Current Mailing Address:

3105 NW 3RD AVENUE #2
POMPANO BEACH, FL 33064

New Mailing Address:

4 DOGWOOD TRAIL PLACE
OCALA, FL 34472

FEI Number: 20-5072114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, BATISTA M
3105 NW 3RD AVENUE #2
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

SILVA, BATISTA M
4 DOGWOOD TRAIL PLACE
OCALA, FL 34472 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: BATISTA M. SILVA

09/05/2007

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: PSD () Delete
Name: SILVA, BATISTA M
Address: 3105 NW 3RD AVENUE #2
City-St-Zip: POMPANO BEACH, FL 33064

Title: VTD () Delete
Name: DA SILVA, AILTON M
Address: 3105 NW 3RD AVENUE #2
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: SILVA, BATISTA M
Address: 4 DOGWOOD TRAIL PLACE
City-St-Zip: OCALA, FL 34472

Title: VTD (X) Change () Addition
Name: DA SILVA, AILTON M
Address: 4 DOGWOOD TRAIL PLACE
City-St-Zip: OCALA, FL 34472

I hereby certify that the information supplied with this filing does not qualify 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: BATISTA M. SILVA

PSD

09/05/2007

Electronic Signature of Signing Officer or Director

Date