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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1, Corporation Name P93000003827 (1)

SILVIO SZILVE, INC.

FILED Apr 27 1998 8:00am Secretary of State



4000 01 0101	e of Business	Mailing Address						
1865 PLEASANT DR. JUNO BEACH FL 33408		1865 PLEASANT D						
		JUNO BEACH FL	33408		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					01/19/1993	•		
2. Principal Pl	ace of Business	2a. Mailing Addres	S		4. FEI Number		T 7	Applied For
21		26			65-0376259		Not Applicable	
Suite, Apt. W. etc.		Suite, Apt. #, et	lc.		——————————————————————————————————————		\$8.75 Additional	
22		27	⊢ ₁ '		5. Certificate of Status Desired		•	Required
City & State)	City & State			6. Election Campaign Financing		\$5.0	May Be
23		28			Trust Fund Contribution			d to Fees
Zip	Country	Zip	Co	ountry	8. This corporation owes or has p	paid the curr	ent year 1	ntangible
24	25	29	30		Personal Property Tax due Jur	ne 30.	Yes	□ No
	g. Name and Address of Curre	ent Registered Agent			10, Name and Address of New F	Registered A	gent	
SIL	VIO, NANCY			81 Name				
186	SS PLEASANT DR.			82 Street Add	Street Address (P.O. Box Number is Not Acceptable)		***	
JU	NO BEACH FL 33408			or or or	digo (i .c. box Humbs) is 110t Accept	шыю		
				83				
				94 64			11	
				84 City		FL	85 Zip	Code
11. Pursuant to	o the provisions of Sections 697.08	02 and 607 508, Florida	Statutes, the	above-named co	rporation submits this statement for the ation's board of directors. I hereby acc	purpose of	changing	its registered
	anisterant ament or both in the Stat	le of Finida/ Such change	: was authoriz	red by the carpor:	ation's board of directors. I hereby acc	ept the appo	ointment a	s registered
office or re	n familiatewith, and accept the obli	ibation≰of/Section 607.05	05. Elorida St	atutes				
	n familiat with, and accept the obli	hations of Section 607.05	05, Florida St	tatutes.				
SIGNATURE	n familiar with, and accept the oblin	gations of Section 607.05		tatutes. ared Agent signature req		DATE		
SIGNATURE	Signature tyled or printed name of registers of a	Le hin		red Agent signature req	purod when reinstalin o)	DATE		
SIGNATURE	Signature tyled or printed name of registers of a	operal and title if applicable	(NO!) Registe	red Agent signature req		DATE		DRS IN 12
SIGNATURE	Signature tyled or printed navy of registers as	gent and filled applicable ND DIRECTORS	(NO:E Registe 13	ered Agent signature req	purod when reinstalin o)	DATE	DIRECTO	DRS IN 12
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office or director of the corporation or the receiver or pessage and accurate and that my signature sharings are saile logal effect as it induces the corporation or the receiver or pessage and empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed for on an attachment with an address.

SIGNATURE