2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 16, 2004 8:00 am DOCUMENT # P03000079352 **Secretary of State** 1. Entity Name 03-16-2004 90027 007 ***150.00 VALERIE R. SILVERMAN, INC. Principal Place of Business Mailing Address C/O ENGELBERG, CANTER & MILGRIM, P.L. 3230 STIRLING RD, STE 1 HOLLYWOOD FL 33021 C/O ENGELBERG, CANTER & MILGRIM, P.L. 3230 STIRLING RD, STE 1 HOLLYWOOD FL 33021 14000144 3. Mailing Address 2. Principal Place of Business 7701 S Flagler Drive 7701 S Flagler Drive Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) 4. FEI Number 01-0792495 Applied For City & State City & State West Palm Beach, FL West Palm Beach, FL Not Applicable Country Palm Beach Countr \$8:75 Additional -33405 33405 5. Certificate of Status Desired Palm Beach Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ENGELBERG, MORRIS Street Address (P.O. Box Number is Not Acceptable) C/O ENGELBERG, CANTER & MILGRIM, P.L. 3230 STIRLING RD, STE 1 **HOLLYWOOD FL 33021** Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. DPS DP XXChange. Addition TITLE Delete TETLE Silverman, Valerie R SILVERMAN, VALERIE R NAME NAME 3230 STIRLING RD, STE 1 STREET ADDRESS 7701 S Flagler Drive STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP CITY-ST-ZIP West Palm Beach, FL 33405 DVPT ☐ Change **XX**Addition ☐ Delete TITLE TITLE NAME Silverman, Stephen STREET ADDRESS STREET ADDRESS 7701 S Flagler_Drive CITY-ST-ZIP CITY-ST-ZIP 33405 West Palm Beach, FL Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify 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 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.

President

SIGNATURE:

FILED