

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 13, 2006 08:00 AM**  
**Secretary of State**

|                                                   |                                                                                   |
|---------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # L56331</b>                          |  |
| 1. Entity Name<br><b>SILVER CONTRACTORS CORP.</b> |                                                                                   |

|                                                                                                       |                                                                                         |
|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| Principal Place of Business<br><b>3109 STIRLING RD.<br/>SUITE 200<br/>FT. LAUDERDALE, FL 33312 US</b> | Mailing Address<br><b>3109 STIRLING RD.<br/>STE 200<br/>FT. LAUDERDALE, FL 33312 US</b> |
|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|



01232006 - No Chg-P CR2E034 (11/05)

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|                                    |                                                        |
|------------------------------------|--------------------------------------------------------|
| 4. FEI Number<br><b>65-0197566</b> | Applied For<br><input type="checkbox"/> Not Applicable |
|------------------------------------|--------------------------------------------------------|

|                                                           |                                       |
|-----------------------------------------------------------|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |
|-----------------------------------------------------------|---------------------------------------|

|                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------|
| 6. Name and Address of Current Registered Agent<br><br><b>HOLLANDER, WALTER J.<br/>3109 STIRLING RD.<br/>STE 200<br/>FT. LAUDERDALE, FL 33312</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------|

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

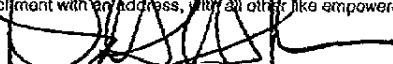
9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

| 10. OFFICERS AND DIRECTORS                     |                                                                                 |
|------------------------------------------------|---------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>HOLLANDER, DAVID G.<br>3109 STIRLING ROAD NO. 200<br>FORT LAUDERDALE, FL  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | V<br>HOLLANDER, EVAN<br>3109 STIRLING ROAD NO. 200<br>FORT LAUDERDALE, FL       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | SD<br>HOLLANDER, WALTER J.<br>3109 STIRLING ROAD NO. 200<br>FORT LAUDERDALE, FL |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                 |

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12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:  **DAVID G. HOLLANDER**  
PRES. (954) 962-9700  
Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_