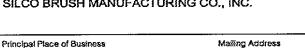
## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## ANNUAL REPORT DOCUMENT # 599054 1. Exitly Name SILCO BRUSH MANUFACTURING CO., INC.

5. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES INC

FILED
Mar 29, 2004 08:00 AM
Secretary of State



2300 CORAL WAY SUITE 200 MIAMI, FL 33145

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MIAMI, FL 33145

2300 CORAL WAY SUITE 200 MIAMI, FL 33145



Applied For
Not Applicable
\$8.75 Additional Fee Required

Caytime Phone #

DO NOT WRITE

IN THIS SPACE

## 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 eccept the obligations of registered agent, AM A DA CANTERA (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. HILE > BEHMOIRAS, BERTA STREET ADDRESS 5660 COLLINS AVE #21-C CON-ST-ZIP MIAMI BEACH, FL 33140 TITLE BEHMOIRAS, MOISES NAME 5660 COLLINS AVE.,#21-C STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL BJIII NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 337LE NAME STREET ADDRESS CRY-ST-ZIP TITI.F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filling 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.

ED NAME OF SIGNING OFFICER OR DIRECTOR