2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 599054

Entity Name: SILCO BRUSH MANUFACTURING CO., INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

2300 CORAL WAY 2300 CORAL WAY SUITE 200 SUITE 200

MIAMI, FL 33145 US

Current Mailing Address: New Mailing Address:

2300 CORAL WAY 2300 CORAL WAY SUITE 200 SUITE 200 MIAMI, FL 33145 US

FEI Number: 59-1866522 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLORIDA ANNUAL REPORT SERVICES INC 2300 CORAL WAY SUITE 200 MIAMI, FL 33145 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: S (X) Change () Addition Name: BEHMOIRAS, BERTA S (X) Change () Addition Name: BEHMOIRAS, BERTA

Address: 5660 COLLINS AVE #21-C
City-St-Zip: MIAMI BEACH, FL 33140

SECTION SAVE #21-C
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: TD () Delete Title: TD (X) Change () Addition Name: BEHMOIRAS, MOISES BEHMOIRAS, MOISES

 Name:
 BEHMOIRAS, MOISES
 Name:
 BEHMOIRAS, MOISES

 Address:
 5660 COLLINS AVE.,#21-C
 Address:
 5660 COLLINS AVE.,#21-C

 City-St-Zip:
 MIAMI BEACH, FL
 33140 US

 Name:
 FISHMAN, ESTHER
 Name:
 FISHMAN, ESTHER

 Address:
 4200 HILLCREST DR #701
 Address:
 4200 HILLCREST DR #701

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:
 HOLLYWOOD, FL 33021 US

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 BEHMOIRAS, RAFAEL
 Name:
 BEHMOIRAS, RAFAEL

 Address:
 20425 NE 19TH CT
 Address:
 20425 NE 19TH CT

 City-St-Zip:
 MIAMI, FL 33179
 City-St-Zip:
 MIAMI, FL 33179 US

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: MOISES BEHMOIRAS T 04/28/2009