

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # F01000001683



Entity Name  
**SILBERMAN ENTEPRISES, INC.**

Principal Place of Business  
**1180 LANDS END ROAD  
 HYPOLUXO ISLAND  
 LANTANA, FL 33462**

Mailing Address  
**1180 LANDS END ROAD  
 HYPOLUXO ISLAND  
 LANTANA, FL 33462**



01092006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>34-0529890</b>	Applied For 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**

**SILBERMAN, LYN H  
 1180 LANDS END ROAD  
 HYPOLUXO ISLAND  
 LANTANA, FL 33462**

**DO NOT WRITE  
 IN THIS SPACE**

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  
 After May 1, 2006 Fee will be \$550.00**

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

**OFFICERS AND DIRECTORS**

POSITION	<b>PCTD SILBERMAN, LYN H</b>
ADDRESS	<b>1180 LANDS END ROAD HYPOLUXO ISL LANTANA, FL 33462</b>
ADDRESS	
ADDRESS	
ADDRESS	
ADDRESS	
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ADDRESS	
ADDRESS	

1100000398017  
 01/30/06-80074-019 150.00

**DO NOT WRITE  
 IN THIS SPACE**

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: **1-16-06** **561-540**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #