

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 22, 2007 08:00 A
Secretary of State

DOCUMENT # F04000004678

1. Entity Name
SILK GARDENS INTERNATIONAL COMPANY



Principal Place of Business

**5471 NW 113 PL
MIAMI, FL 33178**

Mailing Address

**5471 NW 113 PL
MIAMI, FL 33178**

DO NOT WRITE IN THIS SPACE



05182007 No Chg-P CR2E034 (11/05)

4. FEI Number

95-4627351

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**INOUE, GEORGE
5471 NW 113 PLACE
DORAL, FL 33172**

**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 accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	INOUE, GEORGE
STREET ADDRESS	5471 SW 113 PLACE
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	P
NAME	INOUE, ELENI
STREET ADDRESS	5471 SW 113 PLACE
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/31/07-80003-019 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

George Inoue
GEORGE INOUE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/18/07

Date

(305) 406-0102

Daytime Phone #