

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000004004

Entity Name: SOMETHING SILVER, INC.

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

19500 BALLINGER WAY NE STE 200  
SHORELINE, WA 98155

**New Principal Place of Business:**

**Current Mailing Address:**

19500 BALLINGER WAY NE STE 200  
SHORELINE, WA 98155

**New Mailing Address:**

FEI Number: 91-1689608

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 US

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

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

**OFFICERS AND DIRECTORS:**

Title: CPT  
Name: SWAN, CHERYL  
Address: 19500 BALLINGER WAY NE STE 200  
City-St-Zip: SHORELINE, WA 98155

Title: VCP  
Name: WARREN, ANDREW  
Address: 19500 BALLINGER WAY NE STE 200  
City-St-Zip: SHORELINE, WA 98155

Title: S  
Name: WARREN, ANDREW  
Address: 19500 BALLINGER WAY NE STE 200  
City-St-Zip: SHORELINE, WA 98155

I hereby 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 all other like empowered.

SIGNATURE: CHERYL SWAN

CPT

02/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date