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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90097 016 ***150.00

DOCUMENT # F24258

1. Corporation Name

SILE ENTERPRISES,INC.

Principal Place of Business Mailing Address 1361 WASHINGTON AVE MIA BCH FL 33139 US Mailing Address 23456 MIRABELLA CIRCLE SOUTH 717 PONCE DE LEON BLVD. STE 215 BOCA RATON FL 33433 DO NOT WRITE IN THIS SPACE	ACAN LAAL
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US BOCA RATON FL 33433 DO NOT WRITE IN THIS SPACE	
I Date Incompared of the Outsided	
US 3. Date Incorporated or Qualifed	
03/27/1981	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applie	d For
21	pplicable
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired	
22 Fee Requi	red
City & State City & State 6. Election Campaign Financing \$5.00 Ma	
23 Trust Fund Contribution Added to F	ees
Zip Country Zip Country 8. This corporation owes the current year Intangible	
24 25 29 30 Personal Property Tax. Yes	No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
81 Name	
FERDIE, AINSLEE R 82 Street Address (P.O. Box Number is Not Acceptable)	
717 PONCE DE LEON BLVD, STE 215	
CORAL GABLES FL 33134	ĺ
84 City 85 Zip Cod	- '
FL ()	
	istered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its recoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	ered
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: