

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 10, 2008 08:00 AM
Secretary of State

DOCUMENT # M44031

1. Entity Name
SILVERLANE REALTY, INC.



Principal Place of Business
2801 NE 208 TERR.
#102
AVENTURA, FL 33180

Mailing Address
2801 NE 208 TERR.
#102
AVENTURA, FL 33180



01042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-2344645

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SILVERMAN, BARRY M
19553 NW 37TH AVENUE
AVENTURA, FL 33180

**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 reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SILVERMAN, BARRY
STREET ADDRESS	19953 N.E. 37TH AVE.
CITY- ST- ZIP	NO. MIAMI BEACH, FL
TITLE	VPD
NAME	WENDER, STEPHEN
STREET ADDRESS	19553 N.E. 37TH AVE
CITY- ST- ZIP	N.MIAMI BCH., FL
TITLE	STD
NAME	SILVERMAN, ALVIN
STREET ADDRESS	19553 N.E. 37TH AVE
CITY- ST- ZIP	N.MIAMI BCH., FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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01/10/08-80042-025 150.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/08

305-705-0026

Date

Daytime Phone #