

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M81577

Entity Name: SILVER VASE, INC.

FILED
Apr 17, 2007
Secretary of State

Current Principal Place of Business:

% ANDRES E. BARTHA
26001 S.W. 217TH AVE.
HOMESTEAD, FL 33031

New Principal Place of Business:

Current Mailing Address:

% ANDRES E. BARTHA
26001 S.W. 217TH AVE.
HOMESTEAD, FL 33031

New Mailing Address:

FEI Number: 65-0627787 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTHA, ANDRES E
13123 SW 64 CT
MIAMI, FL 33158 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BARTHA, ANDRES E.,
Address: 13123 SW 64 CT
City-St-Zip: MIAMI, FL 33156

Title: VTD () Delete
Name: BARTHA, ILMA,
Address: 13123 SW 64 CT
City-St-Zip: MIAMI, FL 33156

Title: V () Delete
Name: REMETE, TOMAS
Address: 10904 SW 134 CT.
City-St-Zip: MIAMI, FL 33186

Title: V () Delete
Name: BEY, THOMAS P
Address: 23001 SW 156 AVE.
City-St-Zip: MIAMI, FL 33170

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ANDRES BARTHA

PSD

04/17/2007

Electronic Signature of Signing Officer or Director

_____ Date