2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000063465

Entity Name: SILVER LAKES DONUTS, INC.

FILED Apr 28, 2006 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
4700 HIATUS ROAD, STE. 256 SUNRISE, FL 33351			17720 PINES BLVD PEMBROKE PINES, F	17720 PINES BLVD PEMBROKE PINES, FL 33029	
Current Mailing Address:			New Mailing Address:		
4700 HIATUS ROAD, STE. 256 SUNRISE, FL 33351			5701 N PINE ISLAND RD 300 TAMARAC, FL 33321		
FEI Number:	: 65-1027042	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
4700 HIAT	KENNETH US ROAD, ST FL 33351	E. 256 US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	SIMS, KEITH) Delete RIELLE LN., #4008 33326	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (FERRALDO, P 2573 JARDIN V WESTON, FL	VAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (PRIVETT, KEN 3677 SAN SIM WESTON, FL	EON CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PRIVETT, CLIN	ET HALL MANOR	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: TIMPANARO MS 04/28/2006