2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

FILED Feb 16, 2001 8:00 am DOCUMENT # P0000066200 **Secretary of State** 1. Entity Name SILVERLINE ENTERPRISES, CORP. 02-16-2001 90027 015 ***150.00 Principal Place of Business Mailing Address 5961 S.W. 44 TERR. 5961 S.W. 44 TERR. MIAMI FL 33155 MIAMI FL 33155 00022386 2. Principal Place of Business 5961 SW 44 Ferracl 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State. City & State 4. FEI Number 65 - 1022353 Applied For nium Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SILVERIO, JACQUELINE 5961 S.W. 44 TERR. **MIAMI FL 33155** Mianu 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. Roger Silverio, RA. SIGNATURE or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Delete 3R2E034 (10/00) TITLE TIT! F ☐ Change Roger Silverio 5961 SW44 Terrace SILVERIO, JACQUELINE NAME NAME STREET ADDRESS 5961 S.W. 44 TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33155** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY: ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 on the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Roger Silverio, P.D.