

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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16/6100
AV

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 25 PM 3:39



☒ CHECK HERE IF MAKING CHANGES

DOCUMENT # **P01000004351**



1. Entity Name
SILVERCORE, INC.

Principal Place of Business
**1500 NW 1ST ST. SUITES 1A-C
DANIA BEACH FL 33004**

Mailing Address
**1500 NW 1ST ST. SUITES 1A-C
DANIA BEACH FL 33004**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1092346**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SILVERMAN, MICHAEL
1500 NW 1ST ST, SUITES 1A-C
DANIA BEACH FL 33004**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **SILVERMAN, MICHAEL**
CITY-ST-ZIP **2890 GRIFFIN ROAD NO. 5
FT. LAUDERDALE FL 33312**

TITLE ☒ Change ☐ Addition
NAME **D Silverman, Michael**
STREET ADDRESS **1500 NW 1st Street 1A-C**
CITY-ST-ZIP **DANIA BEACH FL 33004**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

12. 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 or the recipient 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 _____ **CEO REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)



Florida Dept. of State
Division of Corporations
Tallahassee, Fl. 32314

Subject: Silvercore, INC.
Ref. P01000004351

Dear Sir,

As per our previous conversations, we are officially informing you that we did not received our uniform business report until late July. We would greatly appreciate the removal of any late fee penalty.

Thank you,


Michelle Sinacore