2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000063178

1. Entity Name SILVER & LOEB HOLDINGS, INC.



Principal Place of Business

cipal Place of Business Maili

600 SW 4TH AVENUE FORT LAUDERDALE, FL 33315 Mailing Address

600 SW 4TH AVENUE FORT LAUDERDALE, FL 33315

FILED Feb 02, 2004 8:00 am Secretary of State

02-02-2004 90015 048 ***150.00

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No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1115986

Applied For Not Applicable

5. Certificate of Status Desired ____

\$8.75 Additional

6. Name and Address of Current Registered Agent

SILVER, JASON 600 SW 4TH AVENUE FORT LAUDERDALE, FL 33315

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|---|--|----------------------------------|-----------------|--------------------------------|--|---|
| | named entity submits this statement for the pions of registered agent. | | | | | amiliar with, and accept |
| Ų, | Signature, typed or printed name of registered agent and title | if applicable. (NOTE: Registered | Agent signature | required when reinstating) | DATE | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution. | | | cing | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIREC | CTORS | | | | ** ** . * . * |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SILVER, JASON A 600 SW 4TH AVENUE FORT LAUDERDALE, FL 33315 | | | * | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V LOEB, RANDON E 600 SW 4TH AVENUE FORT LAUDERDALE, FL 33315 | | | | | |
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| TITLE NAME | | 177 17 1 | | | | |
| STREET ADDRESS CITY-ST-ZIP | | digner . | a. | agg4.: | A STATE OF THE STA | in the second |

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 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.

Jason Silver, Pres.

SIGNATURE: X

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 1 30 04

X954-761-8282