



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90270 013 ***150.00

DOCUMENT # P01000068431 1. Entity Name SOUTHERN SILVER & CHINA, INC.					
Principal Place of Business <i>9639 San Vittore St.</i> Mailing Address <i>9639 San Vittore St.</i> 14010001 9835 LAKE WORTH ROAD 16-320 LAKE WORTH, FL 33467-2300-05					
2. Principal Place of Business 9639 San Vittore Street Suite, Apt. #, etc.		3. Mailing Address 9639 San Vittore Street Suite, Apt. #, etc.		04222005 Chg-P CR2E034 (10/03)	
City & State Lake Worth, FL		City & State Lake Worth, FL		4. FEI Number 65-1141072	
Zip 33467		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AIMIS, ANN 9835 LAKE WORTH ROAD <i>9639 San Vittore St.</i> LAKE WORTH, FL 33467				7. Name and Address of New Registered Agent Name Aimis, Ann Street Address (P.O. Box Number is Not Acceptable) 9639 San Vittore Street City Lake Worth FL Zip Code 33467	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P AIMIS, ANN <input type="checkbox"/> Delete 9835 LAKE WORTH ROAD #16-320 LAKE WORTH, FL 334672300		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
SIGNATURE: <i>Ann Aimis</i> Ann Aimis <i>4/26/05</i> <small>(SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)</small> <small>Date Daytime Phone #</small>					