

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017216

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: SILVER BLUFF PROPERTIES & INVESMENTS, INC.

## Current Principal Place of Business:

7231 S.W. 63RD AVENUE  
SUITE 200  
MIAMI, FL 33143

## New Principal Place of Business:

## Current Mailing Address:

7231 S.W. 63RD AVENUE  
SUITE 200  
MIAMI, FL 33143

## New Mailing Address:

FEI Number: 01-0621837      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, SILVIA  
6315 S.W. 90TH COURT  
MIAMI, FL 33173      US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BRU, RAFAEL I  
Address: 4680 SW 74 STREET  
City-St-Zip: MIAMI, FL 33143

Title: VD ( ) Delete  
Name: GUTIERREZ, MANUEL  
Address: 9755 NW 52ND STREET APT. 106  
City-St-Zip: MIAMI, FL 33178

Title: STD ( ) Delete  
Name: MOREIRA, DOMINGO A  
Address: 5845 SW 100 STREET  
City-St-Zip: MAIMI, FL 33156

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RAFAEL I BRU

PD

04/27/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date