

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000112922

Entity Name: 520 SILVER LANE CORP.

FILED  
Mar 05, 2005  
Secretary of State

## Current Principal Place of Business:

P. O. BOX 265  
BOCA RATON, FL 33429

## New Principal Place of Business:

170 NW SPANISH TRAIL BLVD  
SUITE # 4  
BOCA RATON, FL 33431

## Current Mailing Address:

P. O. BOX 265  
BOCA RATON, FL 33429

## New Mailing Address:

FEI Number: 61-1428889      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SISKIND, SUSIE  
870 LAKE DRIVE  
BOCA RATON, FL 33342      US

## Name and Address of New Registered Agent:

SISKIND, SUSAN  
170 NW SPANISH TRAIL BLVD  
SUITE # 4  
BOCA RATON, FL 33431      US

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: SUSAN SISKIND

03/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SISKIND, RICHARD  
Address: 870 LAKE DRIVE  
City-St-Zip: BOCA RATON, FL 33342

Title: P ( ) Delete  
Name: SISKIND, SUSIE  
Address: 870 LAKE DRIVE  
City-St-Zip: BOCA RATON, FL 33342

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SISKIND, RICHARD  
Address: P.O. BOX 265  
City-St-Zip: BOCA RATON, FL 33429

Title: ST (X) Change ( ) Addition  
Name: SISKIND, SUSAN  
Address: P.O. BOX 265  
City-St-Zip: BOCA RATON, FL 33429

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: SUSAN SISKIND

ST

03/05/2005

Electronic Signature of Signing Officer or Director

Date