2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2004 8:00 am
Secretary of State
07-09-2004 90012 021 ***150.00
07-28-2004 90024 025 ***408.75

DOCUMENT # P03000102154

1. Entity Name
SILVER DECORATION AND GIFTS, INC.

Principal Place of Business	Mailing Address
4719 PEARSON DRIVE WOODRIDGE, VA 22193	4719 PEARSON DRIVE WOODRIDGE, VA 22193

44U3U326

07072004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
6412 N Univ Dr	6412 N Univ Dr
Suite, Apt. #, etc. 136	Suite, Apt. #, etc. 136
City & State: Tamarac FL	City & State: Tamarac Fl
Zip: 33321 Country: Broward	Zip: 33321 Country: Broward

4. FEI Number: 20 0235729 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~CORPORATE CREATIONS NETWORK, INC.~~
~~11380 PROSPERITY FARMS ROAD #221E~~
~~PALM BEACH GARDENS, FL 33410~~

7. Name and Address of New Registered Agent

Name: Maria Montas
Street Address (P.O. Box Number is Not Acceptable): 7939 Catalina Circle
Tamarac FL 33321
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: x [signature] 7/7/04
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
Due by September 9, 2004

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	D ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	GARCIA QUINTERO, FREDDY A	NAME	
STREET ADDRESS	4719 PEARSON DRIVE	STREET ADDRESS	7939 Catalina Circle
CITY-ST-ZIP	WOODRIDGE, VA 22193	CITY-ST-ZIP	Tamarac Fl 33321
TITLE	D ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	BORJAS QUANTIP, MARIA A	NAME	
STREET ADDRESS	4719 PEARSON DRIVE	STREET ADDRESS	7939 Catalina circle
CITY-ST-ZIP	WOODRIDGE, VA 22193	CITY-ST-ZIP	Tamarac Fl 33321
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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 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: [signature] 7/7/04 954 726 9244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #