

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108838

Entity Name: SIL COMMUNICATIONS, INC

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

3801 S OCEAN DR
8R
HOLLYWOOD, FL 33019

Current Mailing Address:

16300 NE 19 AVE.
C
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

5440 LYONS RD
SUITE 111
COCONUT CREEK, FL 33073

New Mailing Address:

5220 S UNIVERSITY DR
SUITE C-102
DAVIE, FL 33328

FEI Number: 20-0271434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILIANO, TOMAS
3801 S OCEAN DR
8R
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

SILIANO, TOMAS
5440 LYONS RD
SUITE 111
COCONUT CREEK, FL 33073 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: TOMAS SILIANO

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SILIANO, TOMAS
Address: 3801 S OCEAN DR. SUITE 8R
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SILIANO, TOMAS
Address: 5440 LYONS RD SUITE 111
City-St-Zip: COCONUT CREEK, FL 33073

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: TOMAS SILIANO

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date