

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140398

Entity Name: SILVER DECK, INC.

FILED
May 19, 2005
Secretary of State

Current Principal Place of Business:

1906 ST ANDREWS PLACE
LONGWOOD, FL 32779

New Principal Place of Business:

800 RAVENS CIRCLE
202
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

1906 ST ANDREWS PLACE
LONGWOOD, FL 32779

New Mailing Address:

800 RAVENS CIRCLE
202
ALTAMONTE SPRINGS, FL 32714

FEI Number: 54-2145830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MONTES DE OCA, DARCI R
440 E HIGHTLAND ST
ALTAMONTE SPRINGS, FL 32701 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DA SILVA, JOSE CARLOS
Address: 1906 ST ANDREWS PLACE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DA SILVA, JOSE CARLOS
Address: 800 RAVENS CIRCLE APT 202
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: JOSE CARLOS DA SILVA

D

05/19/2005

Electronic Signature of Signing Officer or Director

_____ Date