2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Jan 24, 2006 8:00 am **Secretary of State** DOCUMENT # P04000006968 1. Entity Name 01-24-2006 90040 001 ***300.00 TRI SILVER, INC. Principal Place of Business Mailing Address 500 CROOKED OAK COURT 500 CROOKED OAK COURT 66000330 LONGWOOD, FL 32779 LONGWOOD, FL 32779 01122006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0586438 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HUTER, O HUNTER C. Kemper DO NOT WRITE 500 CROOKED OAK COURT LONGWOOD, FL 32779 IN THIS SPACE 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 5 FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DKEMPER TITLE NAME KEMBER, HÚNTER A STREET ADDRESS 500 CROOKED OAK COURT CITY-ST-ZIP LONGWOOD, FL 32779 DILE NAME STREET ADDRESS CUTY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-78P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 12. Thereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes, I turther 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 it 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.

FILED