2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000015355

KYLE A. SILVERMAN, P.A.



Principal Place of Business

Mailing Address

712 US HWY ONE

STE400 NORTH PALM BEACH, FL 33408 712 US HWY ONE STE400

NORTH PALM BEACH, FL 33408

FILED Mar 26, 2008 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03172008 No Chg-P		CR2E034 (11/05)			
4. FEI Number			1	Applied For	
38-3695816				Not Applicable	
5. Certificate o	f Status Desired	\$8.75 Additional			

6. Name and Address of Current Registered Agent

SILVERMAN, KYLE A 712 US HWY ONE STE 400

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NORTH PALM BEACH, FL 33408		III TIIIO OF AGE				
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or	registered agent, or bo	oth, in the State of Florida I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title	† applicable (NOTE: Registered	i Agent signati	ire required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SILVERMAN, KYLE A 712 U.S. HIGHWAY ONE, SUITE 400 NORTH PALM BEACH, FL 33408				U00000869853	
TITLE					000000869853 04/09/08-80065-010 190.00	
NAME				`	047 007 00 00000 010 140.00	
STREET ADDRESS						
CITY-ST-ZIP						
TITLE NAME						
STREET ADDRESS				DO	NOT WRITE	
CITY-ST-ZIP						
TITLE	`			IN '	THIS SPACE	
NAME						
STREET ADDRESS					ļ	
CLTY-ST-ZIP						
TITLE						
NAME						
STREET ADDRESS						
CITY-ST-ZIP						
TITLE						
NAME OVER EX ADDRESS					ļ	
STREET ADDRESS						
CITY-ST-ZIP						
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 agreears in Block 10 or Block 11 if changed, or on an attachment with an aptiress, with all other like empowered.						