

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000053823

Entity Name: SILVER VASE CA, INC.

FILED
Jun 30, 2005
Secretary of State

Current Principal Place of Business:

26001 SW 217TH AVE
HOMESTEAD, FL 33031

New Principal Place of Business:

Current Mailing Address:

26001 SW 217TH AVE
HOMESTEAD, FL 33031

New Mailing Address:

FEI Number: 65-0627787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTHA, ANDRES
26001 SW 217TH AVE
HOMESTEAD, FL 33031 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: BARTHA, ANDRES PRESIDE
Address: 26001 S.W. 217 AVE
City-St-Zip: HOMESTEAD, FL 33031

Title: VICE () Change (X) Addition
Name: BEY, PATRICK
Address: 26001 S.W. 2170TH AVE
City-St-Zip: HOMESTEAD, FL 33031

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: ANDRES BARTHA

PRES

06/30/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date