

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2006 8:00 am
Secretary of State

08-04-2006 90016 042 ***150.00

DOCUMENT # P04000108503
 1. Entity Name
 SYLVIA INTERNATIONAL INC



Principal Place of Business Mailing Address
 617 NORTH MAGNOLIA 617 NORTH MAGNOLIA
 ORLANDO, FL 32801 ORLANDO, FL 32801



07312006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 34-2008210 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MICHAEL GARY
 617 NORTH MAGNOLIA
 ORLANDO, FL 32801

DO NOT WRITE 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 _____ DATE _____
Signature (Type or Print Name) Date NOTE: Registered Agent signature required when registering.

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006

9. Elect on Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

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

10. OFFICERS AND DIRECTORS	
NAME PSTD MICHAEL GARY	
STREET ADDRESS 617 NORTH MAGNOLIA	
CITY, ST, ZIP ORLANDO, FL 32801	
TITLE	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
STREET ADDRESS	
CITY, ST, ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information furnished herein does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied in support 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 of the corporation, and that I am authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if included on an attachment with this report with a different title or address.

SIGNATURE: Gary Michael, Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/30/2006 407-310-7620
Date Daytime Phone #