


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90346 031 ***150.00

DOCUMENT # P04000141324 1. Entity Name SILVER BULLET CONSTRUCTION, INC.					
Principal Place of Business 5350 SANDHURST CIR N LAKE WORTH, FL 33463-5810			Mailing Address 5350 SANDHURST CIR N LAKE WORTH, FL 33463-5810		
2. Principal Place of Business <i>3777 Providence Rd</i>		3. Mailing Address <i>3777 Providence Rd</i>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <i>Boynton Beach, FL</i>		City & State <i>Boynton Beach, FL</i>		4. FEI Number 20-1742895	
Zip 33436		Country 		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MAZZOCCHI, MASSIMO 3777 PROVIDENCE RD BOYNTON BEACH, FL 33436			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 <i>Massimo Mazzocchi</i> <i>Jose Rivera</i> <i>Giuseppe Mazzocchi</i> <i>4/12/05</i> <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P D RIVERA, JOSE 5350 SANDHURST CIR N LAKE WORTH, FL 33463	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAZZOCCHI, MASSIMO 3777 PROVIDENCE RDQ BOYNTON BEACH, FL 33436	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAZZOCCHI, GUISEPPE 125 BUTTWOOD CIR BOYNTON BEACH, FL 33436	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			SIGNATURE: <i>Massimo Mazzocchi</i> <i>Jose Rivera</i> <i>Giuseppe Mazzocchi</i> <i>4/12/05</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		