


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 28, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P05000126523</b>	
1. Entity Name <b>SILENT IMPRESSIONS INC.</b>	

Principal Place of Business <b>3049 NW 26 STREET BOCA RATON, FL 33434</b>	Mailing Address <b>3049 NW 26 AVENUE BOCA RATON, FL 33434</b>
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**DO NOT WRITE IN THIS SPACE**



02202007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-3538201</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**RUPPERT-SCHULZ, ULRIKE  
3049 NW 26 AVENUE  
BOCA RATON, FL 33434**

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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 *Ulrike Ruppert-Schulz* *Ulrike Ruppert-Schulz* *2-26-07*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, S RUPPERT-SCHULZ, ULRIKE 3049 NW 26 AVENUE BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCHULZ, NORBERT 3049 NW 26 AVENUE BOCA RATON, FL 33434
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03/08/07-80022-012 150.00

12. I hereby 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 appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ulrike Ruppert-Schulz* *Ulrike Ruppert-Schulz* *2-26-07* *561-542-0368*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #