

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90025 041 ***150.00

DOCUMENT # P05000132401

1. Entity Name
SILVER KEG PUBLISHING, INC.



Principal Place of Business
4024 LAKE UNDERHILL RD. #F
ORLANDO, FL 32803

Mailing Address
4024 LAKE UNDERHILL RD. #F
#F
ORLANDO, FL 32803

2. Principal Place of Business - No P.O. Box #

2600 Maitland Ctr Pkwy
Suite, Apt. #, etc.
Suite 360

3. Mailing Address

2600 Maitland Ctr Pkwy
Suite, Apt. #, etc.
Suite 360

City & State
Maitland FL

City & State
Maitland FL

Zip
32751

Country
USA

Zip
32751

Country
USA

01252008 Chg-P CR2E034 (12/06)

4. FEI Number
20-3764618

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

WILEN, BARRY A
4601 SHERIDIAN STREET SUITE 208
HOLLYWOOD, FL 33021

7. Name and Address of New Registered Agent

Name Margolis, Brian

Street Address (P.O. Box Number is Not Acceptable)

4024 Lake Underhill Rd. # F

City Orlando

FL

Zip Code 32789

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 Brian Margolis, President

1-25-08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	MARGOLIS, BRIAN	
STREET ADDRESS	4024 LAKE UNDERHILL RD. #F	
CITY-ST-ZIP	ORLANDO, FL 32789	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Brian Margolis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-08

407-660-2626

Date

Daytime Phone #