

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000076590

Entity Name: SILVESTRI BUILT, INC

FILED
May 19, 2008
Secretary of State

Current Principal Place of Business:

22618 COUNTY ROAD 49
OBRIEN, FL 32071 US

New Principal Place of Business:

Current Mailing Address:

10680 SOUTH OCEAN DRIVE
APT # 205
JENSEN BEACH, FL 34957 US

New Mailing Address:

FEI Number: 51-0586951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVESTRI, RICHARD C
10680 SOUTH OCEAN DRIVE
APT # 205
JENSEN BEACH, FL 34957 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: P () Delete
Name: SILVESTRI, RICHARD C
Address: 10680 SOUTH OCEAN DRIVE
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: TREA () Delete
Name: SILVESTRI, NANCY D
Address: 10680 SOUTH OCEAN DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: SEC () Delete
Name: VAZQUEZ, THERESA M
Address: 5708 BUCHANAN DRIVE
City-St-Zip: FORT PIERCE, FL 34982 US

Title: VP () Delete
Name: SILVESTRI, RICHARD J
Address: 6065 BLACKWATER TRAIL
City-St-Zip: ATLANTA, GA 30328 US

Title: VP () Delete
Name: SILVESTRI, PAUL A
Address: 292 CAVE BEAR COURT
City-St-Zip: MERIDIAN, ID 83642

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RICHARD C SILVESTRI

PRES

05/19/2008

Electronic Signature of Signing Officer or Director

_____ Date