

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000098122

Entity Name: AMY SILVERMAN, P.A.

FILED  
Apr 09, 2007  
Secretary of State

## Current Principal Place of Business:

99 SE MIZNER BLVD  
APT 704  
BOCA RATON, FL 33432

## New Principal Place of Business:

## Current Mailing Address:

99 SE MIZNER BLVD  
APT 704  
BOCA RATON, FL 33432

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SILVERMAN, AMY  
99 SE MIZNER BLVD  
APT 704  
BOCA RATON, FL 33432 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: SILVERMAN, AMY  
Address: 99 SE MIZNER BLVD APT 704  
City-St-Zip: BOCA RATON, FL 33432 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRES ( ) Change (X) Addition  
Name: SILVERMAN, AMY PRES  
Address: 99 SE MIZNER BLVD. APT. 704  
City-St-Zip: BOCA RATON, FL 33432 US

I hereby certify that the information supplied with this filing does not qualify for the 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: AMY SILVERMAN

PRES

04/09/2007

Electronic Signature of Signing Officer or Director

Date