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FILED

May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000039673 (7)

1. Corporation Name
SILVEROCK, INC.



Principal Place of Business

12400 BISCAYNE BLVD
NORTH MIAMI FL 33181

Mailing Address

12400 BISCAYNE BLVD
NORTH MIAMI FL 33181-2521

2. Principal Place of Business

21 3201 North Federal Hwy.

Suite, Apt. #, etc.

22 Suite 201

City & State

23 Fort Lauderdale, FL

Zip

24 33306

Country

25 USA

2a. Mailing Address

26 3201 North Federal Hwy.

Suite, Apt. #, etc.

27 Suite 201

City & State

28 Fort Lauderdale, FL

Zip

29 33306

Country

30 USA

3. Date Incorporated or Qualified

06/04/1993

3a. Date of Last Report

08/12/1996

4. FEI Number

06-1370615

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

SILVERMAN, ROBERT J
12400 BISCAYNE BLVD
NORTH MIAMI FL 33181

10. Name and Address of New Registered Agent

81 Name

Robert A. Sandler

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

3201 North Federal Highway

83 Suite

Suite 201

84 City

Fort Lauderdale,

FL

85 Zip Code

33306

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligation in Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME SILVERMAN, ROBERT H
STREET ADDRESS 12000 BISCAYNE BLVD
CITY-ST-ZIP MIAMI FL

TITLE SD ☐ DELETE

NAME SANDLER, ROBERT A
STREET ADDRESS 1200 BISCAYNE BLVD SUITE 219
CITY-ST-ZIP MIAMI FL

TITLE PD ☒ DELETE

NAME KRAMER, BRUCE
STREET ADDRESS 1182 NORMANDY DRIVE
CITY-ST-ZIP MIAMI BEACH FL

TITLE D ☐ DELETE

NAME KRAMER, BRUCE
STREET ADDRESS 12000 BISCAYNE BLVD., SUITE 219
CITY-ST-ZIP MIAMI FL 33181

TITLE D ☒ DELETE

NAME SACK, MARK
STREET ADDRESS 1182 NORMANDY DR.
CITY-ST-ZIP MIAMI BEACH FL 33181

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Robert J. Silverman
1.3 STREET ADDRESS 3201 North Federal Highway, Ste 201
1.4 CITY-ST-ZIP Fort Lauderdale, FL 33306

2.1 TITLE SD ☒ Change ☐ Addition

2.2 NAME Robert A. Sandler
2.3 STREET ADDRESS 3201 North Federal Highway, Ste 201
2.4 CITY-ST-ZIP Fort Lauderdale, FL 33306

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE VD ☒ Change ☐ Addition

4.2 NAME Bruce H. Kramer
4.3 STREET ADDRESS 3201 North Federal Highway, Ste 201
4.4 CITY-ST-ZIP Fort Lauderdale, FL 33306

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

SEC.

CR2E034 (9/96)