FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

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95 MAY -1 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # P93000051978 (3)

1. Corporation Name
SILICON GROUP, INC.

Principal Place of Business	Mailing Address
~~1415 EAST SUNRISE BLVD., SUITE 601~~ ~~FT. LAUDERDALE FL 33304~~	~~1415 EAST SUNRISE BLVD., SUITE 601~~ ~~FT. LAUDERDALE FL 33304~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/23/1993
3a. Date of Last Report: 11/23/1994

2. Principal Place of Business
21: 3650 Coral Ridge Dr.
Suite, Apt. #, etc. 22: #107
City & State 23: Coral Springs FL
Zip 24: 33065 Country 25: Broward

2a. Mailing Address
26: 3650 Coral Ridge Dr.
Suite, Apt. #, etc. 27: #107
City & State 28: Coral Springs FL
Zip 29: 33065 Country 30: Broward

4. FEI Number: 65-0428644 ☐ 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

~~ADLER, RUSSELL ESQ.~~
~~1415 EAST SUNRISE BLVD., SUITE 601~~
~~FT. LAUDERDALE FL 33304~~

10. Name and Address of New Registered Agent

81 Name: Adler, Russell Esq.
82 Street Address (P.O. Box Number is Not Acceptable): 3650 Coral Ridge Dr #107
83
84 City: Coral Springs FL 85 Zip Code: 33065

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 or 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 4-27-95
Signature of new registered agent (if changing) (NOTE: Registered Agent signature required when changing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	DP	11 TITLE	☒ Change ☐ Addition
12 NAME	SANDLER, MITCHELL B	12 NAME	
13 STREET ADDRESS	~~1405 S.W. 6TH COURT, #11~~	13 STREET ADDRESS	3650 Coral Ridge Dr #107
14 CITY ST ZIP	~~POMPANO BEACH FL 33069~~	14 CITY ST ZIP	Coral Springs FL 33065
21 TITLE	~~Sec / Treasurer~~ Sec / T	21 TITLE	☐ Change ☒ Addition
22 NAME	~~Russell Adler~~ Russell Adler	22 NAME	
23 STREET ADDRESS	~~3650~~ 3650 Coral Springs Dr #107	23 STREET ADDRESS	
24 CITY ST ZIP		24 CITY ST ZIP	Coral Springs FL 33065
31 TITLE		31 TITLE	☐ Change ☐ Addition
32 NAME		32 NAME	
33 STREET ADDRESS		33 STREET ADDRESS	
34 CITY ST ZIP		34 CITY ST ZIP	
41 TITLE		41 TITLE	☐ Change ☐ Addition
42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY ST ZIP		44 CITY ST ZIP	
51 TITLE		51 TITLE	☐ Change ☐ Addition
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY ST ZIP		54 CITY ST ZIP	
61 TITLE		61 TITLE	☐ Change ☐ Addition
62 NAME		62 NAME	DP 6/19
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 if changed, or on an attachment with an address.

SIGNATURE: [signature] 4-27-95 (305) 755-3839
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0211068 CF