FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400005026 (7)

ALLAN SILVERBERG, INC.

FILED
Apr 30 1998 8:00am
Secretary of State

1 , , ,					
Principal Place of Business		Mailing Address			
1939 PARK MEADOWS DRIVE FORT MYERS FL 33907		1939 PARK MEADOWS DRIVE FORT MYERS FL 33907			
				DO NOT WRITE: IN THIS SPACE 3. Date Incorporated or Qualified	
				01/12/1994	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0461048	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5, Cortificate of Status Desired	\$8.75 Additional
22		27		6. Confincate of Status Desired L1	Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	[28] Zip	Country	Trust Fund Contribution	Added to Fees
24	25	F:1	30	8. This corporation owes or has paid the Personal Property Tax due June 30	Current year Intangible
	g. Name and Address of Curre		30,	10. Name and Address of New Registere	
SIL	VERBERG, ALLAN		81 Name		
1939 PARK MEADOWS DRIVE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	·
FORT MYERS FL 33907				oss (i.e. box ratings) is not recoptable,	
			83		
			84 City		. 85 Zip Code
				F	'L
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stal m familiar with, and accept the obli	e of Florida. Such change was au	thorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE					
	Signature, typed or printed name of registerest a		Fa gistored Agent signature requir		
12.	OFFICERS A	AD DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Standard Change Addition
NAME	SILVERBERG, ALLAN		1 1 117LE		LT Cliarite LT Modillon
STREET ADDRESS 1939 PARK MEADOWS DRIVE		Æ	1.2 NAME 1.3 STREFT ADDRESS		
CITY-ST-ZIP	FORT MYERS FL 33907	' L	14 CITY-ST-ZIP		
TITLE	T OIL MILENO I E COOST	DELETE	21 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		:
CITY-ST-ZIP			2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			3 ? NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP		DUETE	3 4 CITY - ST - ZIP		
TITLE		DELETE	4.1 TiTLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 YITLE		Change Addition
NAME		been	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
HILE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZIP		
14. I hereby c	ertify that the information supplied	with this filing does not quality for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information

(4) I 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 suppliemental 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 tustice 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 attrichment with an address.

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Alba Silventer (Pres)

4/22/98

941.277.01/3

YZEUS4 (10/9/