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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 14 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000045920 (3)

## **SILVAFOAM CORPORATION**

Principal Place of Business		Mailing Address			OFFICE FIELD IN THE STATE OF TH
7650 COURTNEY CAMPBELL CAUSEWAY SUITE 1120		7650 COURTNEY CAMPBELL CAUSEWAY SUITE 1120		DO NOT WRITE IN TH	HIS SPACE
TAMPA FL 33607		TAMPA FL 33607		3. Date Incorporated or Qualified	
				06/20/1994	
2. Principal P	ace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21		26		59-3290119	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27 Ch. 9 Chair			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	<b>[28]</b> Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes <b>52</b> -No
	g. Name and Address of Curre			10. Name and Address of New Register	ed Agent
MCNAMARA, THOMAS P				ZABETH K. DAVIS.	ESQ.
2909 BAY TO BAY BLVD. 82			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
SUITE 309			83 7650	Courtney Campbell Cous	eway, Suite 1120
TAN	MPA FL 33629		83	, .	•
	_		84 TAMP		85 Zip Code
44 Purcuant	to the Pavisions of Sactions 607.04	A2eurd 607 1508 Florida Statu			-L 33667
11. Pursuant to the Jovisions 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 expension by the corporation's board of directors. I hereby accept the appointment as registered agent. Fam Justin with any or personal statement of the purpose of changing its registered agent. Fam Justin with any or personal statement for the purpose of changing its registered agent. Fam Justin and Justin					
I (		Jakons of, Section 607.0505, f	ionda Statutes	4/1	<i>198</i>
SIGNATURE	Stocker Briefor printed words of registered as	gent and left ill applicable (NO	TE Registered Agent signature ru	quired when reinstating) DAT	IE
12.	OFFICERS AF	VD DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	DAVIS, RICHARD C		1.2 NAME	7650 Courtney Campbell	CSWY #1120
STREET ADDRESS	14280 CARLSON CIRCLE				• • • •
CITY-ST-ZIP	TAMPA FL	DELFTE	1.4 CITY-ST-ZIP	Tampa FL 33607	Change Addition
TITLE	1	<b>™</b> ptrut	2 1 TITLE		FT Custilis FT Manuou
NAME OTREST ASSESSED	AYERS, GREGORY S		2.2 NAME		
STREET ADDRESS	3113 W SAN CARLOS ST		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	TAMPA FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-\$T-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETÉ	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-\$1-2IP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-S1-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. I hereby certify that the information supplied with this filing uses 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.