

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA SECRETARY OF STATE
CORPORATION
STATE OF FLORIDA
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
CORPORATION
STAMPED - 3 5 13:00

DOCUMENT # P94000050050 (1)

1. Corporation Name

SILVERS AVIATION FINANCE, INC.

Principal Place of Business

**-1141-KANE CONCOURSE-
-BAY HARBOR ISLANDS-FL-33154**

Mailing Address

**-1141-KANE CONCOURSE-
-BAY HARBOR ISLANDS-FL-33154**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/28/1994

3a. Date of Last Report

4. FEI Number
65-0500677

Applied For
Not Applicable

2. Principal Place of Business
21 % HUGHES SILVERS + GLASSMAN

2a. Mailing Address
26 % HUGHES SILVERS + GLASSMAN

22. **1140 KANE CONCOURSE - 5th FLR**

27. **1140 KANE CONCOURSE - 5th FLR**

23. **BAY HARBOR ISLANDS, FL**

28. **BAY HARBOR ISLANDS FL**

24. **33154**

29. **33154**

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

**SILVERS, ROBERT H
-1141-KANE CONCOURSE-
-BAY HARBOR ISLANDS FL-33154**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
% HUGHES SILVERS + GLASSMAN
83. **1140 KANE CONCOURSE - 5th FLR**
84. **BAY HARBOR ISLANDS** **FL** 85. **33154**

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 of Registered Agent (Signature required above address)

Signature of Registered Agent (Signature required above address)

DATE

12. OFFICERS AND DIRECTORS

1. NAME
D SILVERS, DAVID
2. STREET ADDRESS
-1141-KANE CONCOURSE
3. CITY-ST-ZIP
-BAY HARBOR ISLANDS-FL-33154

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information placed with this filing is voluntarily furnished and does not qualify for the exemption rules in Sections 199.032-199.034, Florida Statutes. I further certify that the information and the filing are not required by any federal or state law, and I understand that my signature shall have the same legal effect as if made under oath. That I am a full-time or part-time resident of the State of Florida, and I am qualified to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of officers and directors of the corporation with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

DAVID SILVERS

2/22/95

305 864-7531