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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000011884** (0)

SLV DEVELOPMENT CORP.

4800 AIRPORT RD N NAPLES FL 33942	4800 AIRPORT RD N NAPLES FL 34105-2510	
Principal Place of Business	Mailing Address	

FILED May 19 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 4800 AIRPORT RD N NAPLES FL 33942 NAPLES FL 34105-2510									
					3. Date Incorporated or Qualified 3a. Date of Last Repor 02/10/1995 10/28/1996			ort	
2. Principal P	Place of Business	2a. Mailing Address	····		4. FEI Number	10/10/	Applie	od For	
21		26			65-0587737			pplicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	te	City & State			6. Election Campaign Financia		\$5.00 Ma		
23		28			Trust Fund Contribution	" 🗆	Added to F		
Zip	Country	Zip	Country	/	8. This corporation has liability			9.032,	
24	25	29	30		Florida Statutes	Yes N			
ODA	9, Name and Address of Currer	n negisterea Agent	81	Name	10. Name and Address of Nev	v Hegistered Age	<u>nt</u>		
	INT, RICHARD C I PELICAN BAY BLVD								
	E 400		62	Street Add	fress (P.O. Box Number is Not Acco	eptable)			
	LES FL 33963		83						
			84	City			5 Zip Cod		
	to the provisions of Sections 607.050					FL	1		
signature					ared when to instaling) ADDITIONS/CHANGES TO C	DAYE DEFICERS AND DI	RECTORS II	N 12	
TITLE	DP	☐ DELETE	1.1 1/11 E					Addition	
NAME	VILLARAZA, F. ARTHUR		1.2 NAME						
STREET ADDRESS	116 CORDILLERA ST		1.3 STREE	ADDRESS					
CITY-ST-ZIP TITLE	MUNTINLUPA, PHILLIPINES	DELFTE	14 CITY-5	S1 - ZIP			Change _	Addition	
NAME	VILLARAZA, SALVACION L	DECERC	2 1 TITLE 2 2 NAME	1			Change	_ MUUIIIBII	
STREET ADDRESS	116 CORDILLERA ST			ADDRESS					
CITY-ST-ZIP	MUNTINLUPA, PHILLIPINES		2. 4 CiTY-						
TITLE		DELETE	3.1 1(1) (€		 		Change _	Addition	
NAME			3.2 NAME						
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP		DELETE	3.4. CITY- 4.1 TITLE	51 - ZIP			Change	Addition	
NAME	1		4.2 NAME			U		- 1 10 ((D))	
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP			4.4 City-5	ST-ZIP					
TiTL€		DEFE 18	51 TITLE					Addition	
NAME			5.2 NAME		000002 1 -06/02/970	ౢౢ౽ౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢౢ)		
STREET ADDRESS				ADDRESS	-06/02/970	1035014			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 5	51 - 202	***330.00		Change	Addition	
NAME			6.2 NAME				-	_	
STREET ADDRESS	,		63 STREET	ADDRESS			CS.	19/97	
CITY-ST-ZHP			6.4 CITY-5	ST - 7:0°			5/1	7/97	

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 if changes, 20 may attain ment with an address.