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 # P96000031382 (0)

FILED Apr 28 1998 8:00am Secretary of State

SILVER	I AGE CENTER, INC.			
Principal Plac	e of Business	Mailing Address		- I ABDIOBY KAD IBIIA DIIII DESIY DALIY BESIN BOLDO KART INBOG SINDI KOLUE ILDI KADI
7171 CORAL	WAY, SUITE 500	7171 CORAL WAY, SU	ITE 500	$\int_{\Omega} dt$
MIAMI FL 33155 MIAMI FL 33155				CO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				04/10/1996
2. Principal Place of Business 2a. Mailing		2a. Mailing Address	<u></u>	4. FEI Number Applied For
21		26		65-0657235 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
22		27		Fee Required
City & Stat	e e	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Ζιρ	Country	Zip	Country 30	8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30. Yes No
24	9. Name and Address of Curn	ent Registered Agent	[30]	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
YF	RO, IMARA		B1 Nam	· · · · · · · · · · · · · · · · · · ·
	71 CORAL WAY, SUITE 500		20 0	41.11 (0.0 p. 11 1.11 1.11 1.11 1.11 1.11 1.11
MIAMI FL 33155			82 Stre	at Address (P.O. Box Number is Not Acceptable)
•	AIII 1 C 00100		83	
			84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Stat	utes, the above-name	
office or i	registered agent, or both, in the Sta im familiar with, and accept the obl	ite of Florida. Such change wat idations of Section 607 0505.	s authorized by the c Florida Statutes	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE		garans or, occurs correctly	ordina ordinatoo,	
SIGNATURE	Signature, typed or printed name of registered a	gent and tile if applicable (N	OTF Registered Agent signal	ure required when reinstating) DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VPD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	YERO, IMARA		1.2 NAME	
STREET ADDRESS	1320 SW 45 AVE.		1.3 STREET ADDRES	S
CITY-ST-ZIP	MIAM# FL 33134		1.4 CITY - ST - ZIP	
TITLE	P	[] DELETE	2 1 TITLE	L] Change L] Addition
NAME	GOMEZ, JORGE	***	2.2 NAME	
STREET ADDRESS	7171 CORAL WAY, SUITE 5	900	2.3 STREET ADDRES	S
CITY-ST-ZIP	MIAMI FL 33155	Decese	2 4 CITY - ST - ZIP	Dhann Haddun
TITLE		L) DELETE	3.1 TITLE	L. Change L. Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRES	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition
NAME			4.2 NAME	C Original C Monitori
NAME STREET ADDRESS			4.2 NAME 4.3 STREET ADDRES	
CITY-ST-ZIP			L	
TITLE		DELETE	4.4 CITY - ST - 20P 5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRES	
City-St-Zip			5.4 CITY - ST - ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			63 STREET ADDRES	s
CITY ST. 710			EARITY ST TIP	

14. 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 supplication indicated on this annual report or supplication in the information indicated on this annual report or supplication 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 by or an attachment with an address.