

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

FILED
Jan 28 1998 8:00am
Secretary of State

DOCUMENT # P96000070877 (1)

1. Corporation Name

SILVERSTONE INVESTMENTS, INC.

Principal Place of Business

2127 BRICKELL AVE.
SUITE 2204
MIAMI FL 33129

Mailing Address

2127 BRICKELL AVE.
SUITE 2204
MIAMI FL 33129

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/26/1996

4. FEI Number

65-0688932

Applied For

Not Applicable

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 751 COLLINS AVE

Suite, Apt. #, etc.

22 101

City & State
23 Miami Beach, FL

Zip
24 33139

Country
25 Dade

2a. Mailing Address

26 751 COLLINS AVE

Suite, Apt. #, etc.

27 101

City & State
28 Miami Beach FL

Zip
29 33139

Country
30 Dade

9. Name and Address of Current Registered Agent

MARTINEZ, JUAN C
2127 BRICKELL AVE.
SUITE 2204
MIAMI FL 33129

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

751 COLLINS AVE

83

SUITE 101

84

City MIAMI BEACH

FL

85 Zip Code 33139

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD ☐ DELETE

NAME MARTINEZ, JUAN C
STREET ADDRESS 2127 BRICKELL AVE. APT. 2204
CITY-ST-ZIP MIAMI FL 33129

TITLE VTD ☐ DELETE

NAME FRAGA, ELENA
STREET ADDRESS 2127 BRICKELL AVE. APT. 2204
CITY-ST-ZIP MIAMI FL 33129

TITLE ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 751 COLLINS AVE

1.4 CITY-ST-ZIP MIAMI BEACH FL 33139

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 751 COLLINS AVE

2.4 CITY-ST-ZIP MIAMI BEACH FL 33139

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 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 changed, or on any attachment to this report.

SIGNATURE:

Juan Martinez

1/19/97

305-538-5955

CR2E034 (10/97)