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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000012911

1. Corporation Name

AL SILVER ASSOCIATES INC.

						<u> </u>	81 0{8 0 0 4 3i	(
Principal Place	of Business	Mailing Address						•
4658 HAZELTON LANE 4658 HAZELTON LANE								
LAKE WORTH FL 33467 LAKE WORTH I			FL 33467			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
						02/10/1997		Į.
· · · · · · · · · · · · · · · · · · ·		0 - 14 - 11 0 - 1 0 0				4. FEI Number	Ar	pplied For
2. Principal Pl	ace of Business	2a. Mailing Address						ot Applicable
21		26]				22-3496435		Additional
Suite, Apt. #, etc. Suite, Apt. #, etc						5. Certifcate of Status Desired		equired
22 27								
City & State	·	City & State				6. Election Campaign Financing		May Be to Fees
23		28				Trust Fund Contribution		101 003
Zip	— — · · · · · · · · · · · · · · · · · ·			Country		8. This corporation owes the current year	ntangible ☐ Yes	□No
24			30	т		Personal Property Tax. 10. Name and Address of New Registere		
	9. Name and Address of Currer	it Registered Agent		81	Name	10. Maine and Address of New Negistere	u Aguin _	
ĆU VII	ED ALEY			"	Name		_	
	ER, ALEX			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
	HAZELTON LANE				<u> </u>			
LAKE	WORTH FL 33467			83				Ì
				84	City		. 85 Zip	Code
,					•	<u> </u>	<u>L) </u>	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the a	bove	-named cor	rporation submits this statement for the purpose	of changing its	registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Flonda, Such change was a tions of, Section 607,0505, Flo	autnorizet orida Stat	υtes.	ne corpora	tion's board of directors. I hereby accept the app	omanom do re	-giotoi o
- :	·							1
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registered	i Agent	signature requi	ired when reinstating) DATE		
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	P	☐ DELETE	1.1 TI	TLE			☐ Change	Addition
NAME .	SILVER, ALEX		1,2 N	AME				Į
STREET ADDRESS	4658 HAZELTON LANE		1.3 \$	TREET.	ADDRESS			•
CITY-ST-ZIP.	LAKE WORTH FL 33467		1.4 C	ITY-ST	-ZIP		_	
TITLE	EARE WORTH TE GO TO	DELETE	2.1 TI				☐ Change	☐ Addition
NAME	•		22 N	AMF	-			}
					ADDRESS	•		ľ
STREET ADDRESS	•				ľ	•		
CITY-ST-ZIP			2. 4 C	3TY-\$1	1-211		Change	Addition
TITLE			3.1 H			•		_
NAME +					4000000			
STREET ADDRESS					ADDRESS			Ļ
CITY-ST-ZIP!		☐ per fre	_	:πγ-s1	F-ZIP		☐ Change	` Addition
TITLE .		☐ DELETE	4,111					
NAME			4.21		-			
STREET ADDRESS			4.3 S	TREET	ADDRESS			ļ
CITY-ST-ZIP				ITY-ST	-ZIP			T A dates
TITLE		☐ DELETE	5.1 T		Ì		☐ Change	Addition
NAME			5.2 N	AME				1
STREET ADDRESS			. 5.3 S	TREET	ADDRESS			
CITY-ST-ZIP .				ITY-ST	- ZIP			
TITLE		☐ DELETE	6.1 T	ITLE			☐ Change	Addition
NAME 1			6.2 N	AME	Ī			

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 an affactive with an address with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Daytime Phone #

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90051 033 ***150.00