

<b>DOCUMENT # P98000019850</b>			
1. Entity Name <b>SILVER LADY YACHTS, INC.</b>			
Principal Place of Business 913 SYMPHONY BEACH LANE APOLLO BEACH FL 33572		Mailing Address 913 SYMPHONY BEACH LANE APOLLO BEACH FL 33572	
2. Principal Place of Business <b>6308 MARBELL A BLVD</b> Suite, Apt. #, etc.		3. Mailing Address <b>6308 MARBELL A BLVD</b> Suite, Apt. #, etc.	
City & State <b>APOLLO BEACH FL</b>	City & State <b>APOLLO BEACH FL</b>	Zip <b>33572</b>	Country <b>USA</b>
6. Name and Address of Current Registered Agent			
ESPIES, KEVIN J ESQ. 1212 SOUTHEAST FIRST AVENUE FORT LAUDERDALE FL 33316-1802			Name Street Address (if different) City
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.			
SIGNATURE _____ <small>(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required)</small>			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		FILE NOW!!! FEE IS \$550.00 - After SEPTEMBER 13, 2000 Min. will be \$750.00 Make Check Payable to Department of State	
11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILVER, JOHN J JR. 913 SYMPHONY BEACH LANE APOLLO BEACH FL 33572 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILVER, KAREN A 913 SYMPHONY BEACH LANE APOLLO BEACH FL 33572 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 6033(c)(2) of the Internal Revenue Code because the information is true and accurate and that my signature shall have the effect of a declaration under penalty of perjury that the information is true and accurate and that I am authorized by the board of directors of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, to change, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i> RE: 6/00 REC-3000			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_

Daytime Phone # \_\_\_\_\_