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 # P98000029519

1. Corporation Name

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90031 011 ***150.00

SILVER TOO INC.					<u>.</u>		_
7360 C	ce of Business ORAL WAY STE 21	Mailing Address 7360 CORAL WA		E 21			.9
MIAMI, FL 33155 MIAMI, FL 33155					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 03/31/98		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	⊢ +	oplied For
21		26			65-0828457		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A	
22		City & State			S. Flanks Communication	\$5.00	`
City & Sta	te	├ , ′			6. Election Campaign Financing Trust Fund Contribution	Added I	
23]	Country	Zip	Country		8. This corporation owes the current year		
Zip	25		0		Personal Property Tax.	Yes	□No
24	9. Name and Address of Current		-		10. Name and Address of New Registe	red Agent	
		_	81	Name			
HUEF	RTA, FERNANDO A	•	82	Ctrons Add	ress (P.O. Box Number is Not Acceptable)		 .
	CORAL WAY STE 2	ŀ	02	Street Addi	ress (P.O. Box Number is Not Acceptable)		
MIAN	MI,FL 33155		83				
	_					los l Zin /	Cada
			84	City		FL 85 Zip (Code
12.	Signature, typed or printed name of registered agent OFFICERS ANI	DIRECTORS	13.	it signature require	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTO	
TITLE	PSD	☐ DELETE	1.1 TITLE			Change	Accitic
NAME	HUERTA, FERNANDO	A	1.2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP	MIAMI, FL 33155	<u></u>	14 CITY-ST	r-ZIP	<u> </u>		- Aggs as
TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	}		2.2 NAME	ļ			
STREET ADDRESS			2.3 STREET	. !			
CITY-ST-ZIP			2.4 CITY-S 3.1 TITLE	T-ZIP		Change	Additio
TITLE	1		3.2 NAME			<u>_</u>	
NAME			3.3 STREET	Anneree			
STREET ADDRESS]		3.4. CITY-S	1			
CITY-ST-ZIP TITLE			4.1 TITLE	1-21		☐ Change	Additio
NAME	<u> </u>		4. 2 NAME	}			
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST	1			
TITLE		, DELETE	5.1 TITLE			☐ Change	Addition
NAME			52 NAME,				
STREET ADDRESS	;]		5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S1	r-ZiP			·—
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS	8		6.3 STREET	ADDRESS			
CITY-ST-ZIP	1		6.4 CITY-ST	r-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 an attachment with an address, with all other like empowered.

SIGNATURE:

1 CRATTO DO