

2006 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000100320

1. Entity Name

EDDIE SILVA BRAZIL WOODWORK, CORP.

Principal Place of Business

1260 SE 2nd STREET
SUITE # 2
DEERFIELD BEACH, FL 33441

Mailing Address

8801 32nd AVE
1st FLOOR
EAST ELMHURST, NY 11369

2. Principal Place of Business

875 NE 48th ST.

Suite, Apt. #, etc.

LOT. 24

City & State

POMPANO BEACH, FL

Zip

33064

Country

USA

3. Mailing Address

PO BOX ~~33454~~ 540012

Suite, Apt. #, etc.

City & State

LAKE WORTH, FL

Zip

33454

Country

USA

4. FEI Number

65-0867665

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

40052571

6. Name and Address of Current Registered Agent

SILVA, EDDIE
1260 SE 2nd STREET
SUITE # 2
DEERFIELD BEACH, FL 33441

7. Name and Address of Now Registered Agent

Name -
SILVA, EDVALDO BARROS
Street Address (P O Box Number is Not Acceptable)
875 NE 48th ST. LOT. 24

City
POMPANO BEACH

FL Zip Code
33064

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

03/31/06

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 may Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PVST ☐ Delete
NAME SILVA, EDVALDO BARROS
STREET ADDRESS 1260 SE 2nd STREET
CITY - ST - ZIP DEERFIELD BEACH, FL 33441

TITLE D ☐ Delete
NAME SILVA, EDVALDO BARROS
STREET ADDRESS 1260 SE 2nd STREET
CITY - ST - ZIP DEERFIELD BEACH, FL 33441

TITLE ☐ Delete
NAME
STREET ADDRESS
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TITLE ☐ Delete
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CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE 1 ☐ Change ☐ Addition
NAME
STREET ADDRESS 875 NE 48th ST. LOT. 24
CITY - ST - ZIP POMPANO BEACH, FL 33064

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 875 NE 48th ST. LOT. 24
CITY - ST - ZIP POMPANO BEACH, FL 33064

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

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NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
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 119.07 (3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 qualified by chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/31/06 (646) 805-8160

Date

Daytime Phone #