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

**PROFIT** CORPORATION ANNUAL REPORT

1997

SILVER WOODS BEAR CO.

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V56888

Mailing Address

(3)

## **FILED** May 01 1997 8:00am Secretary of State



2031 N.W. 109 AVENUE PEMBROKE PINES FL 33026			2031 N.W. 109 AVENUE PEMBROKE PINES FL 33026-2246					t is					
								3. Date Incorporated or Qualified					
Principal Place of Business The Principal Place of Business The Principal Place of Business			2a. Mailing Address 26				4.	FEI Number 65-0351896				Applied For Not Applicable	
: Suito, Apt #, etc			Suite, Apt. #, etc.			5.	Certificate of Status De	sired	\$8.75 Additional Fee Required				
City & Stat	le		City & S	State				6.	Election Campaign Fina Trust Fund Contribution	-			O May Be d to Fees
: Zip 24	Coun' <b>25</b>		Zip 29		30	intry			This corporation has lia Florida Statutes	, 12	Yes [	] No	rs. 199.032,
	9, Name and Addr	ess of Current	Registered Ag	ent				10.	Name and Address of	New Re	gistered A	gent	
	ÆR, FRANCES M.					81	Name						
	1 N.W. 109 AVENUE IBROKE PINES FL 3:					82	Street A	ddress (f	P.O. Box Number is Not a	Acceptat	ole)		
						63							
						84	City				FL	1 1 '	p Code
11. Pursuant	to the provisions of Sec	tions 607 0502	and 607 1508,	Florida Statut	es, the al	bove	named c	orporatio	on submits this statement board of directors. I here	for the p	ourpose of	changing	its registered
· office or i	registered agent, or bot yn familiar with, and ac	m, in the State of cept the obligati	r Florida. Such ons of, Section	change was a 607.0505, Fk	authorizeo orida Stat	d by lutes.	the corpo	ration's I	board of directors. I here	by accet	of the appo	intment a	as registered
SIGNATURE		, ,											
Oldiverore	Signaturi, typed or proted can	ം of registered agen; r	and title if applicable	. (NOT	E Registered	d Agen	t signature re	quired whe	reinstating)		DATE		
12.		OFFICERS AND I			13.				ADDITIONS/CHANGES T	O OFFIC	ERS AND	DIRECTO	
, 19CF	D CHANCE	14	l	DELETE	11 TH	TLE						Change	e 🔲 Addition
NAME	SILVER, FRANCES				1 2 NA	AME							
STREET ADDRESS	2031 N.W. 109 AV				1.3 ST	REET A	ADDRESS						
CITY ST 7dP	PEMBROKE PINES	FL			1.4 Cf	TY-ST	- ZIP						
TITLE	D DETERM		Į	DELETE	2.1 717	TLE						Change	Addition
NAME	SILVER, PETER L.	P4 11 4P			2.2 NA	AME							
STREET ADDRESS	2031 N.W. 109 AV				2.3 ST	REET A	ADDRESS						
CITY - ST - ZIP	PEMBROKE PINES	FL			2. 4 CI	ITY - ST	r- ZIP						
THUE				DELETE	3.1 7(1	TLE						Change	Addition
NAME					3.2 NA	ME							
STREET ADDRESS					3.3 ST	REETA	ADDRES\$						
- Grty - ST- ZIP					3.4. CI	ITY-SI	- 7IP						
THLE				DELETE .	4.1 ] [	ηE					1	Change	Addition
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STREET ACCORESS					4.3 ST	REET A	DDAESS						
0(f) S* 7(P					4.4 Cf	TY-ST	- 216						İ
1174.6			I	DELETE	5.1 TII		· · · · · · · · · · · · · · · · · · ·					Change	Addition
NAMÉ					5.2 NA	ME							
STREET ADDRESS					5.3 ST	AEET A	DDRESS						•
CITY - ST - 7IP				•	5.4 CIT		i						:
TITLE				DELETE	6.1 TIT							Change	Addition
NAME					6.2 NA	ME					_	-	·
STREET ADDRESS							DDRESS						
City-St-ZiP					6.4 CIT								
	by cert by that the intern	nation supplied a	with this fiture of	loon not suiglif				end in Co	otion 110 07/2\(i) Florida	o Challata			-4 4b -

reo nereby certly 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 attainment with an address.