

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000054675

**Entity Name:** SILICON INNOVATIONS INC.

**Current Principal Place of Business:**

20533 BISCAYNE BLVD  
SUITE 784  
MIAMI, FL 33180

**Current Mailing Address:**

20533 BISCAYNE BLVD  
SUITE 784  
MIAMI, FL 33180 US

**FEI Number:** 65-1016779

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

ADIVI, ORI  
20533 BISCAYNE BLVD.  
SUITE #784  
MIAMI, FL 33180 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, CHAIRMAN  
Name            CAPUANO, SAMUEL  
Address        20533 BISCAYNE BLVD  
                 SUITE 784  
City-State-Zip: MIAMI FL 33180

Title            VP  
Name            ADIVI, ORI  
Address        20533 BISCAYNE BLVD  
                 SUITE 784  
City-State-Zip: MIAMI FL 33180

Title            SECRETARY, TREASURER  
Name            LEVITZ, ROBERT  
Address        20533 BISCAYNE BLVD  
                 SUITE 784  
City-State-Zip: MIAMI FL 33180

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: ROBERT LEVITZ**

**SECRETARY &  
TREASURER/DIRECTOR**

**02/25/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date