

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90344 041 ***150.00

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1. Entity Name
SOLUTION INFORMATION TECHNOLOGY CORP.



Principal Place of Business
1547 NW 79TH AVENUE
MIAMI, FL 33126

Mailing Address
1547 NW 79TH AVENUE
MIAMI, FL 33126

14001410



2. Principal Place of Business
2160 NW 82 AVENUE
Suite, Apt. #, etc.

3. Mailing Address
2160 NW 82 AVENUE
Suite, Apt. #, etc.

04052004 Chg-P CR2E034 (10/03)

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
65-0909143

Applied For
Not Applicable

Zip 33122-1507 **Country** USA

Zip 33122-1507 **Country** USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

NRAI SERVICES INC
526 E PARK AVE
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name MONARO, ADEMIR R
Street Address (P.O. Box Number is Not Acceptable) 2160 NW 82 AVENUE

City MIAMI **FL** **Zip Code** 33122

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Signature, typed or printed name of registered agent and title if applicable.**

MONARO ADEMIR R **REGISTERED AGENT**

DATE 04/05/04

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P **NAME** MONARO, ADEMIR R ☐ Delete
STREET ADDRESS 1547 NW 79TH AVENUE
CITY-ST-ZIP MIAMI, FL 33126

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P **NAME** MONARO, ADEMIR R ☒ Change ☐ Addition
STREET ADDRESS 2160 NW 82 AVENUE
CITY-ST-ZIP MIAMI, FL 33122

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **MONARO ADEMIR R PRESIDENT** **DATE** 04/05/04 **Daytime Phone #** 305-494-9283