2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002553

Entity Name: SOLETANCHE, INC.

FILED Jul 19, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 401 EAST JEFFERSON, SUITE 201 ROCKVILLE, MD 20850 **Current Mailing Address: New Mailing Address:** 401 EAST JEFFERSON, SUITE 201 ROCKVILLE, MD 20850 FEI Number: 13-1954492 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition TARRALLE, BERNARD Name: Name: 401 EAST JEFFERSON, SUITE 201 Address: Address: City-St-Zip: ROCKVILLE, MD 20850 City-St-Zip: Title: Title: ST () Delete () Change () Addition Name: AMALVY, MARC Name: 6 RUE DE WATFORD Address: Address: NANTERRE, FRANCE 92000, City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition BOCQUENTIN, MICHELE Name: Name: 6 RUE DE WATFORD Address: Address: City-St-Zip: NANTERRE, FRANCE 92000, City-St-Zip: Title: VAST () Delete Title: () Change () Addition HOURNBUCKLE, LEWIS Name: Name: Address: 401 EAST JEFFERSON, SUITE 201 Address: City-St-Zip: ROCKVILLE, MD 20850 City-St-Zip: Title: Title: () Delete () Change () Addition LEFEBURE, LAURANT Name: Name: 401 EAST JEFFERSON, SUITE 201 Address: Address: City-St-Zip: ROCKVILLE, MD 20850 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: DEGEN, WILEHLM 401 EAST JEFFERSON STE 201 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

City-St-Zip:

ROCKVILLE, MD 20850

SIGNATURE: LEWIS HOURNBUCKLE VP 07/19/2004

City-St-Zip: