## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 10, 2006 08:00 AM Secretary of State DOCUMENT # G62315 1. Entity Name SOL TOURS, INC. Principal Place of Business Mailing Address **6039 COLLINS AVE 6039 COLLINS AVE APT 1228 APT 1228** MIAMI BEACH, FL 33140 US MIAMI BEACH, FL 33140 CR2E034 (11/05) 04022006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2321211 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE RODRIGUEZ, RAFAEL 9180 NW 100 STREET SUITE C-103 IN THIS SPACE MIAMI, FL 33166 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 it applicable. INDTE. Replaced Agent signature required when reinstating) \$5.00 May Be Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 $\Box$ Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DSV TITLE CRESTA, HORACIO NAME STREET ADDRESS 6039 COLLINS AVENUE, UNIT 1228 CITY-ST-ZIP MIAMI BEACH, FL MGR TITLE 116766000000 EUGINIA-CRESTA, MARIA NUME UN/22/06-80075-007 150.00 STREET ACTORESS **6039 COLLINS AVE 1228** CITY-ST-ZIP MIAMI BEACH, FL 33140 STILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CVIV-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 charged, or on an attachment with an address, with all other like appowered.

UNG OFFICER OR DIRECTOR

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