2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

05-04-2005 90046 010 ****50.00 **DOCUMENT # L03000005415** 07-15-2005 90066 002 *****5.00 SOLAR CAPITAL PARTNERS, LLC 20063334 Principal Place of Business Mailing Address **262 MAR STREET 262 MAR STREET** ST. PETE BEACH, FL 33706 ST. PETE BEACH, FL 33706 US 3. Mailing Address 151 Barbador 2. Principal Place of Busines: Dar bado Suite, Apt. #, etc 07122005 Chg-LLC CR2E083 (10/03) 4. FEI Number Applied For City & State APPLIED FOR 43 am Pa Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KELLER, GOTTLIEB W Street Address (P.O. Box Number is Not Acceptable) 262 MAR STREET ST. PETE BEACH, FL 33796 City Zip Code 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 enjietered agent. (NOTE: Registered Agent signature required when reinstating Fillng Fee is \$50.00 Due by September 7, 2005 Make check payable to Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. TITLE ☐ Delete TITLE Change ☐ Addition GOTTLIEB, KELLER W NAME NAME STREET ADORESS 262 MAR STREET STREET ADDRESS CITY-ST-ZIP ST PETE BEACH, FL 33706 CITY-ST-ZIP ☐ Delete TITLE ☐ Chance ☐ Addition TITLE CHRISTIÂN, HOLTER DR NAME NAME **HERRGOTTWIESGOSSE 188** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AUSTRIL, Delete ΫP Addition TITLE TITLE Change GLOVER, LORI NAME NAME STREET ADDRESS 3100 3RD AVENUE N #201 STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP PHOENIX, AZ 85013 ☐ Change TITLE Detete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Defete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. limited liability company or the SIGNATURE

TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

Jul 15, 2005 8:00 am Secretary of State



July 12, 2005

Division of Corporations P.O. Box 6478 Tallahassee, FL 32314

Re: Annual Report Solar Capital Partners, LLC

Dear Sir/Madam,

We sent to your department (End of April 2005) the Limited Liability Company Annual Report together-with a check-in-the-amount of \$50.00 and an address change. The check was cleared on May 8, 2005.

As we called yesterday your department, we were told it was rejected. We never received the rejected report. (address change)

We have attached a new annual report. Please advise if filled out correct. You can contact us for further questions either per electronic-mail to socool01@msn.com, or per phone at 1-480-570-1141.

Also please recognize the change of address listed below at the letterhead.

I have you included a second check in the amount of \$5.00 for a required the certificate of status.

G.W. Keller

President, Solar Capital Partners, LLC