

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L64482

FILED  
Feb 15, 2011  
Secretary of State

**Entity Name:** THE SOLOMON LAW GROUP, P.A.

**Current Principal Place of Business:**

C/O STANFORD R. SOLOMON  
1881 WEST KENNEDY BOULEVARD  
TAMPA, FL 33606 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O STANFORD R. SOLOMON  
1881 WEST KENNEDY BOULEVARD  
TAMPA, FL 33606 US

**New Mailing Address:**

**FEI Number:** 59-2999938      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SOLOMON, STANFORD R  
1881 WEST KENNEDY BOULEVARD  
TAMPA, FL 33606 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SOLOMON, STANFORD R.  
Address: 1881 WEST KENNEDY BOULEVARD  
City-St-Zip: TAMPA, FL 33606

Title: VPD  
Name: SOLOMON, SABRINA E.  
Address: 1881 WEST KENNEDY BOULEVARD  
City-St-Zip: TAMPA, FL 33606

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: STANFORD R. SOLOMON

PRES

02/15/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date