2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 18, 2006 08:00 AM Secretary of State

DOCUMENT # M1382	4
------------------	---

1. Entity Name SOLOMON AND JOHNSON INVESTMENTS PROMOTORS, INC.



Principal Place of Business

Mailing Address

4160 W. 16 AVE., STE 207 HIALEAH, FL 33012

4160 W. 16 AVE., STE 207 HIALEAH, FL 33012



04052008 DO NOT WRITE IN THIS SPACE

No Chg-P

GR2E034 (11/05)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, JOSE L 4160 W. 16 AVE., STE 207 HIALEAH, FL 33012

DO NOT WRITE IN THIS SPACE

		1					
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 Floride. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE Signature, typed or printed name of registered agent and tife it applicable [NOTE: Registered Agent signature required when reinstating) DATE DATE							
After a school are a school and has a brice at his a short and has a short and has a short a safety of error a safety of							
FILE ROWALL FEE TO STOUND)		 Election Campaign Financing Trust Fund Contribution. 		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GONZALEZ, LEONARDO 4160 W. 18 AVE., STE 207 HIALEAH, FL 33012						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GONZALEZ, LEONARDO 4160 W. 16 AVE., STE 207 HIALEAH, FL 33012				000000516372 05/01/06-80001-024 150,00		
TITLE NAME STREET ADDRESS CITY -ST -ZIP				DO	NOT WRITE		
TIPLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
HAME STREET ADDRESS CITY-ST-ZIP							
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or suppliamental 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 composition 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 chapter 607 or an attachment with an address, with all other like empowered.							