2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006873

Entity Name: SOLITA'S HOUSE INC.

FILED May 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1703 N. TAMPA ST. SUITE 6 TAMPA, FL 33602 **New Mailing Address: Current Mailing Address:** 1703 N. TAMPA ST. SUITE 6 TAMPA, FL 33602 FEI Number: 51-0585799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THOMAS, ANTHONY 1610 BURNING TREE LANE BRANDON, FL 33510 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete JOEL, ONDRA OCTAVIA, TOOKES Name: Name: 1703 N. TAMPA ST Address: 1703 N. TAMPA ST Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602 Title: () Delete Title: (X) Change () Addition BYRD, SEAN Name: BIBIANA, STEFANATOS Name: Address: 1703 N. TAMPA ST Address: 1703 N. TAMPA ST City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602 Title: () Delete Title: () Change () Addition ANTONIO, ISOLDA Name: Name: 1009 E. LAKE AVE. Address: Address: City-St-Zip: TAMPA, FL 33605 City-St-Zip: () Delete Title: VD Title: VD (X) Change () Addition Name: JOSEPH, KAY Name: DORA, HOLLOWAY Address: 1703 N. TAMPA ST. Address: 1703 N. TAMPA ST. City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602 Title: () Delete Title: (X) Change () Addition WILLIAMS, DIANE KHEILANI, PARKER Name: Name: 1703 N. TAMPA ST. 1703 N. TAMPA ST. Address: Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602 Title: () Delete Title: () Change () Addition KOUZMOVA, SVETLANA Name: Name: Address: 1703 N. TAMPA ST. Address: TAMPA, FL 33602 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY THOMAS RA 05/11/2009