

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000023547

Entity Name: SOLE, INC.

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8378 N.W. 56TH STREET  
DORAL, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

8378 N.W. 56TH STREET  
DORAL, FL 33166

**New Mailing Address:**

FEI Number: 65-0992222

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARDENAS, GABRIEL  
14743 S.W. 48TH TERRACE  
MIAMI, FL 33185 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: CARDENAS, GABRIEL D MR  
Address: 14743 S.W. 48TH TERRACE  
City-St-Zip: MIAMI, FL 33185

Title: VP  
Name: CHAVARRI, MANUELITA M MRS  
Address: 14743 S.W. 48TH TERRACE  
City-St-Zip: MIAMI, FL 33185

Title: VP  
Name: TAPIAS, MARLINA E MS  
Address: 5658 NW 113TH AVENUE  
City-St-Zip: DORAL, FL 33178

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: GABRIEL CARDENAS

MR.

01/06/2011

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

\_\_\_\_\_  
Date