2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

FILED Aug 26, 2005 8:00 am Secretary of State

DOCUMENT # P01000065552 1. Entity Name SOLER SYSTEMS, INC.							08-26-20	05 90003 (001 ***150	.00
Principal Place of Business 1770 W. 84 STREET HIALEAH, FL 33014 US		Mailing Address 1770 W. 84 STREET HIALEAH, FL 33014 US		ę ·			50063600			
2. Principal Pl	ace of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			08162005	Chg-P		(10/03)		
City & State		City & State			4. FEI Number Applied For 65-1119918 Not Applicable					
Zip Country		Zip				5. Certificate of Status Desired				
	6. Name and Address of Current			7. Name and	Address of N	ew Registered	I Agent			
PRATS, GABRIEL 2121 PONCE DE LEON BLVD SUITE 240				Name Michael M. Everett, C.P.A. Street Address (P.O. Box Number is Not Acceptable)						
	ABLES, FL (33134			965.	<u>5</u> ,	South	Dixie.	Highw	ay, Third	d Floor
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 registered agent.										
SIGNATURE Signature, typed or printed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
			<u>-</u>							
FILE NOWIII FEE IS \$150.00 Due by September 7, 2005 Trust Fund Contribution						00 May Be ed to Fees			07.193(2)(b), l ive the prior n	
10. OFFICERS AND DIRECTORS						ADDITIONS	CHANGES TO	OFFICERS AN	ND DIRECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST SOLER, ORESTES INR 1770 W. 84 STREET	☐ Delete		1					☐ Change	Addition
TITLE	HIALEAH, FL 33014	☐ Delete	π	E				·····	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				EET ADDRESS (-ST-ZIP						
TITLE NAME STREET ADDRESS		☐ Delete	TITL NAM STRI	I .		· -			Change	Addition
CITY-ST-ZIP TITLE			CIT)	<u>(-ST-ZIP</u>					Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				AE EET ADDRESS 7-ST-ZIP					_ •	
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CITY-ST-ZIP		☐ Delete	CITY	r-ST-ZIP					☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		Car Delets	NAA STR	I .					Strongs	
12. I hereby	Certify that the information supplied wit on this report or supplemental report i poration or the receiver or trustee emp	s true and accurate and that r	r the exe	emption stated ature shall have	a the s	same legal effe	ct as if made u	nder oath; that	I am an officer	or director

bss&s

Berenfeld, Spritzer, Shechter & Sheer

CERTIFIED PUBLIC ACCOUNTANTS

ATTACHMENT SOUG3600 www.bsss-cpa.com

August 10, 2005

Department of the State Division of Corporations P.O. Box 6198

Tallahassee, FL 32314-6198

RE: Soler Systems, Inc. I.D. No.: 65-1119918

Document No. \$201000065552

To Whom It May Concern:

The above referenced corporation has asked us to respond to your notice of Dissolution. Please be advised that the corporation relocated to a new office space. Some correspondence was never forwarded to the new address or lost in the move. Their new registered agent is Michael M. Everett, C.P.A.

We are hereby requesting that you accept the enclosed check in the amount of \$150 and abate the penalties and return the corporation's status to "active".

Thank you for your cooperation in this matter.

Very truly yours,

Michael M. Everett, C.P.A.