

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000076796

Entity Name: SOLUTION REALTY INC.

FILED
Sep 12, 2006
Secretary of State

Current Principal Place of Business:

1563 SUNSET DRIVE
CORAL GABLES, FL 33143

New Principal Place of Business:

Current Mailing Address:

1563 SUNSET DRIVE
CORAL GABLES, FL 33143

New Mailing Address:

FEI Number: 02-0632264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERO, JULIA
1550 MADRUGA AVE
500
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

RIVERO, JULIA
1563 SUNSET DRIVE
CORAL GABLES, FL 33143 US

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: JULIA RIVERO

09/12/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RIVERO, JULIA
Address: 1550 MADRUGA AVE
City-St-Zip: CORAL GABLES, FL 33146

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RIVERO, JULIA
Address: 1563 SUNSET DRIVE
City-St-Zip: CORAL GABLES, FL 33143

Title: VD () Change (X) Addition
Name: CUADRADO, EVELYN
Address: 1563 SUNSET DRIVE
City-St-Zip: CORAL GABLES, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIA RIVERO

P/D

09/12/2006

Electronic Signature of Signing Officer or Director

Date