

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000159707

Entity Name: SALSO HOLDINGS, INC.

FILED
Nov 09, 2005
Secretary of State

Current Principal Place of Business:

155 OCEAN LANE DRIVE
APT. 1001
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

155 OCEAN LANE DRIVE
APT. 1001
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 20-2492076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIZABETH F. CALVO, P.A.
328 CRANDON BLVD.
SUITE 226
KEY BISCAYNE, FL 33149 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: LIZABETH F. CALVO

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SERVALLI, SUSANNA M
Address: 155 OCEAN LANE DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: MALVISI, GLORA N
Address: 155 OCEAN LANE DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUSANNA M SERVALLI

DIR

11/09/2005

Electronic Signature of Signing Officer or Director

Date