



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 10, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P05000004596</b> 1. Entity Name <b>EL SOL BRANDS, INC.</b>	
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Principal Place of Business <b>8700 NW 101ST STREET MEDLEY, FL 33178</b>	Mailing Address <b>8700 NW 101ST STREET MEDLEY, FL 33178</b>
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**DO NOT WRITE IN THIS SPACE**



08022007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>86-1128158</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**COHEN, NOAM J  
13899 BISCAYNE BLVD SUITE 209  
N MIAMI BEACH, FL 33181**

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IN THIS SPACE**

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 title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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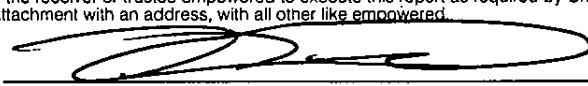
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO DELPRETE, CARL 15989 D ALENE DR DELRAY BEACH, FL 33484</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V FRANCISCO, ROBERT 19405 SW 41ST STREET MIAMI, FL 33029</b>
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U00000771852  
08/10/07-80003-016 550.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:   
**CARL DELPRETE**

Date **7-30-07** Daytime Phone # **305 884 3808**