2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025416

Entity Name: SOLARTE'S PAINTING CORP.

FILED May 08, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

TAMPA, FL 33634

Current Principal Place of Business: New Principal Place of Business:

7602 PINERY WAY 6910 W WATERS AVE

812

TAMPA, FL 33615 TAMPA, FL 33634

Current Mailing Address: New Mailing Address:

7602 PINERY WAY 6910 W WATERS AVE

812 TAMPA, FL 33634 TAMPA, FL 33615

FEI Number: 20-2373862 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

OSORIO, JOSE O OSORIO, JOSE O 6151 OAK CLUSTER CIRCLE 1419 W WATERS AVE TAMPA, FL 33634 104 TAMPA, FL 33604 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: JOSE O OSORIO 05/08/2006

> 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:

Name:

() Delete Title: (X) Change () Addition SOLARTE SALAZAR, HAROLD SOLARTE SALAZAR, HAROLD Name: 7602 PINERY WAY APT 5A Address: 6910 W WATERS AVE SUITE 812 Address:

City-St-Zip: TAMPA, FL 33615 City-St-Zip:

() Delete Title: VΡ Title: VΡ (X) Change () Addition

Name: MURCIA, RODRIGO Name: MURCIA, RODRIGO

7602 PINERY WAY APT 5A Address: 6910 W WATERS AVE SUITE 812 Address:

TAMPA, FL 33615 TAMPA, FL 33634 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: HAROLD SOLARTE SALAZAR 05/08/2006