

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000012096

FILED
Jan 09, 2008
Secretary of State

Entity Name: SOLERO CONSTRUCTION & DEVELOPMENT CORPORATION

Current Principal Place of Business:

5101 W. POE AVE.
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

5101 W. POE AVE.
TAMPA, FL 33629

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, MARK
5101 W. POE AVE.
TAMPA, FL 33629 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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GORDON, MARK
Address: 5101 W. POE AVE.
City-St-Zip: TAMPA, FL 33629

Title: VP () Delete
Name: MALLOT-GORDON, SHARON
Address: 5101 W. POE AVE.
City-St-Zip: TAMPA, FL 33629

Title: VP () Delete
Name: TENNEY, MARK
Address: 5428 1ST AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: VP (X) Delete
Name: GUITO, RALPH M III
Address: 5105 W. POE AVE.
City-St-Zip: TAMPA, FL 33629 FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: MARK GORDON

P

01/09/2008

Electronic Signature of Signing Officer or Director

_____ Date