

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000110843

FILED
Jul 06, 2009
Secretary of State

Entity Name: SOL MIAMI INVESTMENTS CORP.

Current Principal Place of Business:

100 LINCOLN ROAD
APT 437
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

100 LINCOLN ROAD
APT 437
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 26-1224542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICENBOIM, JOSE
169 E. FLAGLER ST.
SUITE 1534
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GROSMAN, ALBERTO I
Address: 100 LINCOLN ROAD APT 437
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: GROSMAN, JOSE
Address: 100 LINCOLN ROAD APT 437
City-St-Zip: MIAMI BEACH, FL 33139

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D () Change (X) Addition
Name: GROSMAN, MAURICIO
Address: 100 LINCOLN ROAD APT 437
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Change (X) Addition
Name: TELLAS, MATILDE
Address: 100 LINCOLN ROAD APT 437
City-St-Zip: MIAMI BEACH, FL 33139

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: GROSMAN, ALBERTO

P

07/06/2009

Electronic Signature of Signing Officer or Director

Date