2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000026938

Entity Name: SOLAR KINGS INC.

FILED Nov 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3795 FANTASY WAY BROOKSVILLE, FL 34604 **Current Mailing Address: New Mailing Address:** P.O. BOX 15749 BROOKSVILLE, FL 34604 FEI Number: 26-2179280 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: REVENTAS, JOHN 3795 FANTASY WAY BROOKSVILLE, FL 34604 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P/D () Delete Title: () Change () Addition KING, RONALD Name: Name: 3795 FANTASY WAY Address: Address: City-St-Zip: BROOKSVILLE, FL 34604 City-St-Zip: Title: VP/D Title: VΡ () Delete (X) Change () Addition KING, AARON Name: REVENTAS, CAROL Name: 3795 FANTASY WAY 3795 FANTASY WAY Address: Address: BROOKSVILLE, FL 34604 BROOKSVILLE, FL 34604 City-St-Zip: City-St-Zip: (X) Change () Addition Title: VP/T () Delete Title: REVENTAS, JOHN REVENTAS, JOHN Name: Name: 3795 FANTASY WAY 3795 FANTASY WAY Address: Address: City-St-Zip: BROOKSVILLE, FL 34604 City-St-Zip: BROOKSVILLE, FL 34604 Title: () Delete Title: S/D (X) Change () Addition REVENTAS, CAROL REVENTAS, CAROL Name: Name: Address: 3795 FANTASY WAY Address: 3795 FANTASY WAY City-St-Zip: BROOKSVILLE, FL 34604 City-St-Zip: BROOKSVILLE, FL 34604

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: CAROL REVENTAS S/D 11/17/2009