

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000099672

FILED
Apr 16, 2009
Secretary of State

Entity Name: SOL CONTROL CUSTOM, INC.

Current Principal Place of Business:

5201 STATE RD. 54
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

5201 STATE ROAD 54
NEW PORT RICHEY, FL 34652 US

Current Mailing Address:

5201 STATE RD. 54
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

5201 STATE ROAD 54
NEW PORT RICHEY, FL 34652 US

FEI Number: 26-3671559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, LAZARO
3620 BLOSSOM LAKE DR.
HOLIDAY, FL 34691 US

Name and Address of New Registered Agent:

GARCIA, LAZARO
5201 STATE ROAD 54
NEW PORT RICHEY, FL 34652 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:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: GARCIA, LAZARO
Address: 3620 BLOSSOM LAKE DR.
City-St-Zip: HOLIDAY, FL 34691 US

Title: VP () Delete
Name: MIR RIVERO, AEDRANES
Address: 3620 BLOSSOM LAKE DR.
City-St-Zip: HOLIDAY, FL 34691 US

Title: SEC () Delete
Name: MIR RIVERO, AEDRANES
Address: 3620 BLOSSOM LAKE DR.
City-St-Zip: HOLIDAY, FL 34691

Title: TREA () Delete
Name: MIR RIVERO, AEDRANES
Address: 3620 BLOSSOM LAKE DR.
City-St-Zip: HOLIDAY, FL 34691 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GARCIA, LAZARO
Address: 5201 STATE ROAD 54
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: VP (X) Change () Addition
Name: MIR RIVERO, AEDRANES
Address: 5201 STATE ROAD 54
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: SEC (X) Change () Addition
Name: MIR RIVERO, AEDRANES
Address: 5201 STATE ROAD 54
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TREA (X) Change () Addition
Name: MIR RIVERO, AEDRANES
Address: 5201 STATE ROAD 54
City-St-Zip: NEW PORT RICHEY, FL 34652 US

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: AEDRANES MIR RIVERO

VP

04/16/2009

Electronic Signature of Signing Officer or Director

Date