SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 1, 1995.
AMOUNT DUE ON OR BEFORE 8/1/95: $225 (IF DISSOLVED, REINSTATEMENT DUE TO REINSTATE: $275)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
1995 JUL 12 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000078234 (0)**

1. Corporation Name
SOLID ACQUISITION, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
4451 MERCANTILE AVENUE NAPLES FL 33942	4451 MERCANTILE AVENUE NAPLES FL 33942

3. Date Incorporated or Qualified: **11/11/1993**
3a. Date of Last Report: **06/03/1994**

2. Principal Place of Business (21):
2a. Mailing Address (26):
Suite, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):
City & State (23):
City & State (28):
Zip (24):
County (25):
Zip (29):
County (30):

4. FEI Number: **59-3209434** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DAVELL, WILLIAM C ESQ.
1401 EAST BROWARD BLVD., #300
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: C.W. Davell — DATE: 6/29/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEPHENSON, GARY C 3016 FOREST CLUB DR. PLANT CITY FL 33567	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition REMOVE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAFFERTY, ROBERT S SR 3016 FOREST CLUB DR. PLANT CITY FL 33567	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☒ Change ☐ Addition S ROBERT S. LAFFERTY SR. 2125 S.ANDREWS AVENUE FT.LAUDERDALE, FL 33316
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAFFERTY, ROBERT S JR 3016 FOREST CLUB DR. PLANT CITY FL 33567	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition P ROBERT W. LAFFERTY 2125 S.ANDREWS AVENUE FT.LAUDERDALE, FL 33316
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TRUSDALE, DONNY 3016 FOREST CLUB DR. PLANT CITY FL 33567	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☒ Change ☐ Addition D DONNIE TRUESDEL 2125 S.ANDREWS AVENUE FT.LAUDERDALE, FL 33316
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KEARNEY, MARK 3016 FOREST CLUB DR. PLANT CITY FL 33567	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☒ Change ☐ Addition V MARK KERNEY 2125 S.ANDREWS AVENUE FT.LAUDERDALE, FL 33316
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DELL, HERBERT 3016 FOREST CLUB DR. PLANT CITY FL 33567	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☒ Change ☐ Addition D HERBERT DELL 2125 S.ANDREWS AVENUE FT.LAUDERDALE, FL 33316

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mark Kearney — 7/5/95 — 305-525-4200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
MARK Kerney

0106100 CP

CR2E034 (3/95)