

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000085016

1. Entity Name

SOLOMON HOLDINGS, INC.

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90123 015 ***150.00

Principal Place of Business

1180 GULF BLVD
SUITE 102
CLEARWATER FL 33767

Mailing Address

1180 GULF BLVD
SUITE 102
CLEARWATER FL 33767

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3227096

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

SOLOMON, HOWARD
16312 VILLARREAL DE AVILA
TAMPA FL 33613

7. Name and Address of New Registered Agent

Name

SOLOMON, HOWARD

Street Address (P.O. Box Number is Not Acceptable)

1180 Gulf Blvd #102

City

CLEARWATER

FL

Zip Code

33767

8. 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

Howard Solomon HOWARD SOLOMON - PRESIDENT

MAR 11/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE (\$150.00)
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PVP ☐ Delete
NAME SOLOMON, HOWARD
STREET ADDRESS 1180 GULF BLVD # 102
CITY-ST-ZIP CLEARWATER FL 33767

TITLE S ☐ Delete
NAME SOLOMON, MARIE
STREET ADDRESS 1180 GULF BLVD # 102
CITY-ST-ZIP CLEARWATER FL 33767

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Howard Solomon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAR 11/02 727) 595-9525
Date Daytime Phone #

CR2E034 (9/01)