# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 11, 2006**
**Secretary of State**

DOCUMENT# P93000085761

**Entity Name:** SOLEIL DESIGN BUILD INC.

**Current Principal Place of Business:**

4321 BAY TO BAY BLVD.
TAMPA, FL 33629 US

**New Principal Place of Business:**

**Current Mailing Address:**

4321 BAY TO BAY BLVD.
TAMPA, FL 33629 US

**New Mailing Address:**

**FEI Number: 59-3218592** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SBAR, KARYN K.
4708 W LAUREL RD
TAMPA, FL 33629 US

**Name and Address of New Registered Agent:**

SBAR, KARYN K
4708 W LAUREL RD
TAMPA, FL 33629 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: KARYN K SBAR 01/11/2006
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete
Name: SBAR, KARYN K.
Address: 4708 W LAUREL RD
City-St-Zip: TAMPA, FL 33629

Title: VD ( ) Delete
Name: TAHIRI, KARIM H.
Address: 4708 W LAUREL RD
City-St-Zip: TAMPA, FL 33629

Title: STD ( ) Delete
Name: SBAR, SUSAN S.
Address: 4914 ST. CROIX DR.
City-St-Zip: TAMPA, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition
Name: SBAR, KARYN K
Address: 4708 W LAUREL RD
City-St-Zip: TAMPA, FL 33629

Title: VD (X) Change ( ) Addition
Name: TAHIRI, KARIM H
Address: 4708 W LAUREL RD
City-St-Zip: TAMPA, FL 33629

Title: STD (X) Change ( ) Addition
Name: SBAR, SUSAN S
Address: 4914 ST. CROIX DR.
City-St-Zip: TAMPA, FL

I hereby certify that the information supplied with this filing does not qualify for the 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: KARYN K SBAR DP 01/11/2006
Electronic Signature of Signing Officer or Director Date