

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90250 007 ***150.00

DOCUMENT # P94000042191 1. Entity Name SOLRAC INVESTMENTS CORPORATION	
---	---

Principal Place of Business 28 W. FLAGLER ST. SUITE 400 MIAMI, FL 33130	Mailing Address 28 W. FLAGLER ST. SUITE 400 MIAMI, FL 33130
---	---

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State Zip Country	City & State Zip Country



04202005 Chg-P CR2E034 (10/03)

4. FEI Number 65-0519272	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent ENRIQUEZ, CARLOS A 28 W. FLAGLER ST. SUITE 400 MIAMI, FL 33130-1817	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
---	--

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ENRIQUEZ, CARLOS A 28 W. FLAGLER ST., #400 MIAMI, FL 33130 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ENRIQUEZ, GREGORIO 4498 E. 8TH CT. HIAHLEAH, FL 33013 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	XX Change ☐ Addition 6271 Lake Patricia Drive Miami Lakes, Florida 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ENRIQUEZ, ISMELIA M 4498 E. 8TH CT. HIALEAH, FL 33013 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	XXX Change ☐ Addition 6271 Lake Patricia Drive Miami Lakes, Florida 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carlos A. Enriquez 04/20/2005 (305) 371-3050