

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT



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

1996-07

FILED

97 MAR 12 AM 8:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000020798 (1)

1. Corporation Name

SOLOBAR, INC.

Principal Place of Business

525 NORTH OCEAN BLVD.  
SUITE 923  
POMPANO BEACH FL 33062

Mailing Address

525 NORTH OCEAN BLVD.  
SUITE 923  
POMPANO BEACH FL 33062

3. Date Incorporated or Qualified  
03/14/1995

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 910 ROUNTREE DARY RD

27 UNIT 26

28 WOODBRIDGE ONT

29 141506 30 CANADA

4. FEI Number

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

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC.  
1201 HAYS ST.  
TALLAHASSEE FL 32301

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DPST SZIGETI, EDWARD  
525 N. OCEAN BLVD., SUITE 923  
POMPANO BEACH FL 33062

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

600002112786--9  
-03/13/97-01091--004  
\*\*\*\*365.00 \*\*\*\*365.00

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)(k), 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 in an attachment with an address.

SIGNATURE:

E. SZIGETI

April 26/96 (905) 858-1210

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (12/95)

②

# **SOLOBAR**

***SUPERAUTOMATIC ESPRESSO MACHINES***

March 3, 1997

Florida Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida  
32314

Attn: Leslie Sellers

**Re: Solobar Inc. Reference Number P95000020798**

Further to our telephone conversation dated March 3, 1997 I wish to confirm with you that I am Canadian Counsel to Solobar Inc.

As you are aware, the aforementioned Corporation has been administratively dissolved as a result of failure to file its 1996 corporate annual report form. I believe that no changes have occurred since the Corporation was incorporated.

Please be advised that this Corporation is owned by an individual who spends little time at his residence in Florida and as such, he was not aware of the requirement to make the annual filing.

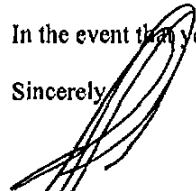
It is my understanding that my client did not receive the annual filing form and as such it missed the deadline. Would you be so kind as to invoke your discretion and waive the penalty and the reinstatement fee as it would certainly appear that the circumstances warrant same.

My client would like to assure you that it will not miss any other filing requirement. Would you be so kind as to send any further annual filing forms to my client at 910 Rowntree Dairy Rd. Unit 26, Woodbridge, Ontario Canada L4L 5W6. In the event that you or the Department should require anything urgently please fax my client at (905) 856-2210.

My client and I would like to thank you for your kind consideration and the waiver of the reinstatement fee. I enclose herein a cheque in the amount of \$365.00 made payable to the Florida Department of State as discussed on the telephone.

In the event that you should have any questions or concerns I would be pleased to hear from you.

Sincerely,



Marcello Di Francesco B.A., L.L.B.  
Barrister & Solicitor  
Canadian Counsel to Solobar Inc.

**910 Rowntree Dairy Road, Unit 26, Woodbridge, Ontario, Canada L4L 5W6  
Telephone 905-856-2210, Fax 905-856-2218, E-Mail [solobar@shopcanada.com](mailto:solobar@shopcanada.com)**