FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P95000024769 (8)

SOLANO INVESTMENT CORP.

FILED Apr 14 1998 8:00am Secretary of State



Principal Place	e of Business	Mading Address						***********
	6TH STREET SUITE 32		10000 S.W. 56TH STREET SUITE 32 MIAMI FL 33165					
MIAMI FL 331	65	MIAMI FL 33165				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	STACE	
						03/28/1995		
2. Principal P	lace of Business	2a. Mailing Addre	986			4. FEI Number		Applied For
21	idde of Eddiness	<u></u>	200					
Suite, Apt.	# etc	Suite Ant #	Suite, Apt #, etc.			65-0575852		Not Applicable Additional
22	<i></i> , <i></i> ,	<u>⊢</u> ¬ '''	27			5. Certificate of Status Desired		Required
City & State	——————————————————————————————————————		City & State			6. Election Campaign Financing	iii	
23	-	 -η ΄	28			Trust Fund Contribution		O May Be of to Fees
Zip	Country	7(p)	Co	untry		8. This corporation owes or has paid the c		
24	25	29	30		•	Personal Property Tax due June 30.	Yes	∏ No
	9. Name and Address of Cur		50	T		10. Name and Address of New Registered		
OI.	HNTANA, LUIS J	·····		81	Name			
	B MINORCA AVE			<u> </u>	<u> </u>			
CORAL GABLES FL 33134				82	Street Add	fress (P.O. Box Number is Not Acceptable)		
00	MAL GABLES FL 33134			83	 			
								i
				84	City	=	85 Zi	p Code
11 Diversant	to the provisions of Sections 607.	0602 and 607 1609 Florid	la Ctatutan the	ab av u	L nomed cor			tio sociatoro il
office or r	egistered agent, or both, in the St	ate of Florida, Such chan	ge was authorize	ed by	y the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	or changing pointment a	as registered
agent. I a	m familiar with, and accept the ob	oligations of, Section 607.	0505, Florida Sta	atute	S.			
SIGNATURE								
12.	Signature, typed or protect name of required	AND DIRECTORS	(NUTE: Hagister		ant signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICERS AN	ID DIBECT	SPS IN 12
TITLE	D	DE		TITLE		ADDITIONS/OFFARGES TO OFFICERS AF	☐ Chang	
NAME	RODRIGUEZ, NELSON P			NAME				, Li Padition
STREET ADDRESS	10000 S.W. 56TH STREET	CHITE 22			T ADDRESS			
	MIAMI FL 33165	OUTL SZ	-					
CITY-ST-ZIP TITLE	MINUM 1 C 33 103	DE		CHY-S TITLE	ST-ZIP		Chano	e [] Addition
NAME		L. D.		NAME			Oneng	E LI AGGILION
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP TITLE		□ DE			ST-ZIP		[] Ohana	. El taggion
		□ 1/1		TITLE	ì		Change	Addition
NAME			9	NAME				
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP					ST-ZIP		<u> </u>	
TITLE		□ DE		TITLE			L Change	a
NAME				NAME				
STREET ADDRESS			4.3.5	STREET	T ADDRESS			1
CITY-ST-ZIP		·····			ST-ZIP			
TITLE		☐ DE	LETE 5.11	TITLE			L. Change	Addition
NAME			5.21	NAME				
STREET ADDRESS			5.3 \$	STAEET	F ADDRESS			
CITY - ST - ZIP				CITY-S	ST-ZIP	<u> </u>		
TITLE		☐ DE	LETE 6.13	TITLE	T		☐ Changi	Addition
NAME			6.21	NAME				1
STREET ADDRESS			6.3 5	STREET	T ADDRESS			ļ
CITY-ST-ZIP					ST - 71P			

14. Thereby 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 annual ruport or supplemental annual fishort 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 representation visited 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 or an attackment with an address. 4,198

SIGNATURE: