

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State

03-11-2002 90045 040 ***150.00

DOCUMENT # P95000042412

1. Entity Name

SOLID INVESTMENTS OF MIAMI, INC.

Principal Place of Business

**3399 PONCE DE LEON BLVD.
 STE 202
 CORAL GABLES FL 33134**

Mailing Address

**3399 PONCE DE LEON BLVD.
 STE 202
 CORAL GABLES FL 33134**

2. Principal Place of Business

3. Mailing Address

**9553 Harding
 Suite, Apt. #, etc. 308**

**PO Box 545867
 Suite, Apt. #, etc.**

City & State

Surfside, FL

City & State

Surfside, FL

Zip

33154

Country

USA

Zip

33154

Country

USA

4. FEI Number

65-0586656

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**BAUMBERGER, HANS
 3399 PONCE DE LEON BLVD.
 STE 202
 CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name **DELSA D. GONZALEZ**

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

9553 HARDING AVE #308

City

SURFSIDE

FL

Zip Code

33154

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

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 IS \$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 ☐ Delete
 NAME **PDS**
 STREET ADDRESS **GONZALEZ, DELSA D**
 CITY-ST-ZIP **7510 LOCHNESS DR.
 MIAMI LAKES FL 33014**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **PDS**
 STREET ADDRESS **GONZALEZ, DELSA D**
 CITY-ST-ZIP **9553 HARDING AVE #308
 SURFSIDE, FL 33154**

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

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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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)(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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)