

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 16, 2007 8:00 am**  
**Secretary of State**

05-16-2007 90161 001 \*\*\*300.00

DOCUMENT # P96000093542

1. Entity Name

THE WAKI & SOL OF MIAMI CORP.



Principal Place of Business

381 EAST 8TH ST  
HIALEAH FL 33010  
US

Mailing Address

381 EAST 8TH ST  
HIALEAH FL 33010  
US



2. Principal Place of Business - No P.O. Box #

99 N.W. 27 Ave

3. Mailing Address

99 NW 27 Ave

Suite, Apt. #, etc.

Suite 202

Suite, Apt. #, etc.

Suite 202

1st MOORE

CR2E034 (10/06)

City & State

Miami FL

City & State

Miami FL

4. FEI Number

65-0718302

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

Zip

FL

Country

33125

Zip

33125

Country

Dade

6. Name and Address of Current Registered Agent

MOLINA SOLTERO, RENE L  
28 FONSECA AVE.  
MIAMI FL 33134

7. Name and Address of New Registered Agent

Name

Molina Soltero, Rene L.

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

99 NW 27 Ave, Suite 202

City

Miami

FL

Zip Code

33125

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing

Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PSD ☐ Delete  
NAME MOLINA SOLTERO, RENE L  
STREET ADDRESS 155 S.W. 39 CT  
CITY-ST-ZIP MIAMI FL 33134

TITLE VTD ☐ Delete  
NAME MICHEL, CARMEN  
STREET ADDRESS 155 S.W. 39 CT  
CITY-ST-ZIP MIAMI FL 33134

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME Molina Soltero, Rene L.  
STREET ADDRESS 99 N.W. 27 Ave #202  
CITY-ST-ZIP Miami FL 33125

TITLE ☒ Change ☐ Addition  
NAME Michel, Carmen  
STREET ADDRESS 99 NW 27 Ave #202  
CITY-ST-ZIP Miami FL 33125

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Carmen Michel CARMEN Michel

Date

4/28/07

Daytime Phone #

786-712-4589