

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90064 016 ***150.00

DOCUMENT # P96000099527

1. Entity Name

SOLOMON GALIANO, INC.



Principal Place of Business

6320 S.W. 32 ST
MIRAMAR FL 33028-5004
US

Mailing Address

6320 S.W. 32 ST
MIRAMAR FL 33028-5004
US

2. Principal Place of Business

3. Mailing Address

1925 BRICKELL AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#TH-14

City & State

City & State

MIAMI FL

Zip

Country

Zip

Country

FL 33129-1737

USA

4. FEI Number

65-0712606

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEISS, HELEN
1925 BRICKELL AVENUE
UNIT TH-14
MIAMI FL 33129

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

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, 2004 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 P
NAME WEISS, HELEN
STREET ADDRESS 1925 BRICKELL AVENUE, SUITE TH-14
CITY-ST-ZIP MIAMI FL 33129 ☐ Delete

TITLE VP
NAME WEISS, DANIEL M
STREET ADDRESS 6320 S.W. 32 ST
CITY-ST-ZIP MIRAMAR FL 33023 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE VP
NAME WEISS DANIEL M
STREET ADDRESS 1925 BRICKELL AVE #TH-14
CITY-ST-ZIP MIAMI FL 33129-1737 ☒ Change ☐ Addition

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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:

Daniel M. Weiss DANIEL M. WEISS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/04
Date

305-860-1896
Daytime Phone #