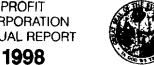
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P9700003010 (0)

THE SOLOMON GROUP OF MANATEE COUNTY, INC.

FILED Feb 17 1998 8:00am Secretary of State



1/11/00

Principal Place of Business		Mailing Address			s namulan, qua saru namu namu namu nabu kabu daru darak diriri adibi ildiri 9911 (691		
6451 19TH STREET EAST. BLDG A		6451 19TH STREET EAST. BLDG A					
SARASOTA FI	L 34243	SARASOTA FL 34243			DO NOT WRITE IN THIS	SISPACE	
					3. Date Incorporated or Qualified	JOI AOL	~
					01/13/1997		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	ΙΔ	pplied For
21	26				65-0757158	 	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	4 · i · d ·				Additional
22 27		27			5. Certificate of Status Desired		lequired
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the co	urrent vear In	ıtangible
24	25	29	30		Personal Property Tax due June 30.		☐ No
	9. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Registered	I Agent	
SO	Lomon, steven p		81	Name			
	1 19TH STREET EAST, BLDG	A	82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
SARASOTA FL 34243			"	Sileet Address (1.0. box Northber is Not Acceptable)			
			83				******
			84	City	FI	85 Zip	Code
11. Pursuant to	o the provisions of Sections 607.0	502 and 607, 1508, Florida Statut	les, the above	L e-named co	reception submits this statement for the numbers	of changing i	its registered
Onice or re	egistered agent, or both, in the Sta in familiar with, and accept the obl	ite of Fiorida. Such change was i	authorized by	/ the corpor	ation's board of directors. I hereby accept the ap	pointment as	registered
	ir laitiliai witti, brio accept trio obi	igations of, Section 607:0505, Fi	orga Statute:	5.			
SIGNATURE 3	Signature, typed or printed name of registered to	agent and little if applicable (NOT	F Registered Age	onl somelure rec	guired when reinstating) DATF		
12.		ND DIRECTORS	13.	ar agriculta req	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	3S IN 12
TITLE	PTD	☐ DELETÉ	1.1 TITLE			Change	Addition
NAME	SOLOMON, STEVEN P		1.2 NAME				
STREET ADDRESS	7916 OAK GROVE CIRCLE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34243		1.4 CITY - S				
TITLE	VSD	DELETE	2.1 TITLE	1-211		Change	Addition
NAME	SOLOMON, D. SUSAN		2.2 NAME	1		LI OHANGO	
STREET ADDRESS	7916 OAK GROVE CIRCLE		2.3 STREET	Annesce			
CITY-ST-ZIP	SARASOTA FL 34243		2. 4 CITY - S				
TITLE	GUULOUIX I E OVETO	DELETE	3.1 TITLE	SI-TIE		Change	☐ Addition
NAME			3.2 NAME			C Onango	Addition
STREET ADDRESS			3.3 STREET	ADDDECC			
CITY-ST-ZIP				1			:
TITLE		DELETE	3.4. CITY - 5	il-YiL		Change	Addition
NAME			4.2 NAME			Ottorige	ELL PRODUCT
STREET ADDRESS			4.2 TRAME	ADDOLCO			
CITY-ST-ZIP			4.4 CITY - S	I			
TITLE		DELETE	5.1 TITLE	1-2IF		Change	Addition
NAME		Second Process in	5.2 NAME			m oligitys	MainAil
STREET ADDRESS				ADDBCCC			
			5.3 STREET				
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	I - ZIP		Change	Addition
NAME		L. Pittie				C CHAIR	☐ Addition
STREET ADDRESS			6.2 NAME	100000			
i			6.3 STREET				
City-St-ZiP	rtify that the Information supplies	with this filing does hat muslifu for	6.4 CITY-ST	ion stated in	n Section 119.07(3)(i), Florida Statutes. I further co	ortify that the	information
officer or di	n this annual report or supplement rector of the corporation or the re- Block 13 if changed, or on an at	ital annual report is titue and acc cover or trustee empowered to e	urate and that execute this r	it my signati eport as rec	ure shall have the same legal effect as if made un quired by Chapter 607, Florida Statutes; and that	nder oath; tha my name app	at I am an pears in