


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000068930 1. Entity Name SOL FUERZA INTERNATIONAL, INC.	
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Principal Place of Business C/O NICOLAS FERNANDEZ 780 NW LEJEUNE, SUITE 324 MIAMI, FL 33126 US	Mailing Address C/O NICOLAS FERNANDEZ 780 NW LEJEUNE, SUITE 324 MIAMI, FL 33126 US
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DO NOT WRITE IN THIS SPACE



01302006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0779411	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ESQUIRE CORPORATE SERVICES, INC.
780 N.W. LEJEUNE ROAD
SUITE 324
MIAMI, FL 33126**

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IN THIS SPACE**

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, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BARRAL FERNANDEZ, FRANCISCO 780 NW LEJEUNE ROAD, SUITE 324 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BEKKITA, CARMEN S 780 NW LEJEUNE ROAD, STE 324 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOLAO, D. ANTONIO M 780 NW LEJEUNE ROAD, STE 324 MIAMI, FL 33126
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/15/06-80018-024 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #