

PROFIT
CORPORATION
ANNUAL REPORT

2000 UBR



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000006341

1. Corporation Name
SOL INTERNATIONAL SALES, INC.

FILED

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SECRETARY OF STATE

Principal Place of Business Mailing Address
% FOGEL RUBIN & FOGEL % FOGEL RUBIN & FOGEL
350 COURTHOUSE TOWER, 44 W. FLAGLER ST. 350 COURTHOUSE TOWER, 44 W. FLAGLER ST.
MIAMI FL 33130 MIAMI FL 33130

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		01/21/1998	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		65-0805987	
24 Country		29 Country		5. Certificate of Status Desired	
				☐ \$8.75 Additional ☐ \$5.00 May Be ☐ Added to Fees	
				6. Election Campaign Financing	
				☐ Trust Fund Contribution ☐	
				7. This corporation owes the current year Intangible	
				☒ Personal Property Tax. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
RUBIN, SCOTT L		81 Name	
% FOGEL RUBIN & FOGEL		82 Street Address (P.O. Box Number is Not Acceptable)	
350 COURTHOUSE TOWER, 44 W. FLAGLER ST.		83	
MIAMI FL 33130		84 City	
		FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		DATE	
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS			
TITLE	0 MYERS, WESLEY W JR.	☐ DELETE	
NAME	7120 EMBASSY BLVD.		
STREET ADDRESS	MIRAMAR FL 33023		
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			
TITLE		☐ DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	PD	☐ Change ☒ Addition	
1.2 NAME	SIEGEL SHEROON		
1.3 STREET ADDRESS	1450 SW 87 AVE		
1.4 CITY-ST-ZIP	PEMBROKE PINES, FL 33025		
2.1 TITLE		☐ Change ☐ Addition	
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		☐ Change ☐ Addition	
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		☐ Change ☐ Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		☐ Change ☐ Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		☐ Change ☒ Addition	
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or in an appointment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wesley Myers 4/25/00 (954) 458-5200

Daytime Phone

CR3E034 (11/99)