

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000103840

08-10-2000 90004 028 ***550.00

1. Entity Name

SOLID EVENT, INC.

FILED

00 SEP 12 PM 3:43

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business 710 FIRST AVE SW #D TALLAHASSEE FL 33770 US	Mailing Address 710 FIRST AVE SW #D LARGO FL 33770-3410 US
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2. Principal Place of Business 1100 Cleveland St Suite, Apt. #, Suite 902 Clearwater, FL 33755-4840 City & State	3. Mailing Address Same Change Suite, Apt. #, etc. 4840 City & State
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DO NOT WRITE IN THIS SPACE

Zip	Country USA	Zip	Country USA	4. FEI Number 59-3557946	Applied For Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DRUCILLA E. BELL, P.A.
710 FIRST AVE SW
SUITE D
LARGO FL 33770

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
830 Fourth Ave NW
City
Largo FL Zip Code
33770

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.

SIGNATURE Drucilla E. Bell (NOTE: Registered Agent signature required when reinstalling) DATE Aug 4, 2000

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERRIEN, ASHANTI 509 NICHOLSON ST CLEARWATER FL 33755 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President John E. Berrien, Sr. 1302 Martin L. King Avenue Clearwater, FL 33755 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Ashanti Berrien US Navy 1302 Martin L King Avenue Clearwater, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Bruce Gaillard 4399 Reeseewood Ct. Columbus, GA 31907 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE: John E. Berrien 8/4/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)