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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V70972

(7)

SOLID INVESTMENTS CORP.

(7

Mailing Address

FILED Feb 10 1997 8:00am Secretary of State



2225 N.E. 20TH AVENUE WILTON MANORS FL 33305			2225 N.E. 20TH AVENUE WILTON MANORS FL 33305-1515								
							3. Date Incorporated or Qualified 10/09/1992		ale of La	st Report	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number			,	
21		26	26				65-0362776	Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.						\$8.7	5 Additional	
22		27	27				5. Certificate of Status Desired Fee Required				
City & State	е	City & State	City & State				6. Election Campaign Financing \$5.00 May Be				
23		28	28			i	Trust Fund Contribution	Added to Fees			
Zip	Country	Zip	Zip Count				8. This corporation has liability for intangible tax under s. 199.032,				
24	25	29	30				Florida Statutes				
	9. Name and Address of	Current Registered Agent				1	0. Name and Address of New Re	gistered.	Agent		
	ingel, arthur d.			81	Namo						
222	5 N.E. 20TH AVENUE		82 Street Add			Addross	(P.O. Box Number is Not Accepted	اداد			
WIL.	TON MANORS FL 33305		62 Street Add			Muuluss	dress (P.O. Box Number is Not Acceptable)				
			ļ	83							
			ļ								
				84	City			FL	85 2	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, typed or printed name of regis		TE Registered	Age	nt signature i	required w	hen revistating)	EIATE			
12.		RS AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECT	ORS IN 12	
TITLE	PSD	☐ DELETE	1 1 111	L <b>E</b>		}			D Chan	ge 🔲 Addition	
NAME	STENGEL, ARTHUR D.		1 2 NA	1.2 NAME							
STREET ADDRESS	2225 NE 20TH AVE		1.3 \$1	1.3 STREET ADDRESS							
CITY-ST-ZIP			1401	1.4.0(TY+S1+ZIP		<u> </u>					
TITLE		☐ DELETE	21717	TLE					Chan	ge 🔲 Addition	
NAME			2.2 NAME								
STREET ADDRESS			2.3 \$16	2.3 STREET ADDRESS							
CITY-ST-ZIP			2.4 CI	2. 4 CITY - ST - ZiP							
TITLE		DELETE	3 1 7 11	317111.6					Chan	ge Addition	
NAME			3.2 NA	3.2 NAME							
STREET ADDRESS			3.3 \$1REE1		ADDRESS	ŀ					
CITY-ST-ZIP			3.4 CI	IY-S	IT-ZIP						
TITLE		DELETE	DELETE 4.1 TIT			[			Chan	ge Addition	
NAME			4. 2 NA	ME							
STREET ADDRESS			4.3 STF	REFT.	ADDRESS						
CITY-ST-ZIP			4.4 CH	Y-\$1	T - ZIP						
TITLE	DELETE			5.1 TITLE					Chan	ge 🔲 Addition	
NAME	5.2		5.2 NA	5.2 NAME						ļ	
STREET ADDRESS			5.3 STF	KEET .	ADDRESS						
CITY-ST-ZIP			5.4 0(1	Y-S1	I - ZIP						
TITLE	DE EST		6.1 1111						Chan	ge Addition	
NAME			6.2 NA	ME							
STREET ADDRESS			6.3 \$16	REET :	ADDRESS						
CITY-ST-ZIP			6.4 CII	Y - ST	1-7(P					İ	
14. I do hereb	y certify that the information s	supplied with this filing does not qual	ify for the c	ver	portion sta	tated in 9	Section 119,07(3)(i), Florida Statute	s. I further	certify th	hat the	
Intormation	n indicated on this annual rep ficer or director of the corpora	ort or supplemental annual report is after or the receiver or trustee empoy god, or on an attachmont with an ad	true and a wered to ex	COLL	rale and :	I that my	signature shall have the same logic	Loffoot ac	il made	under eath: that	