2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000823

Entity Name: SOD SOLLITIONS INC

FILED May 20, 2008 Secretary of State

Littly Na	iiie. 30D30	LOTIONS, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	WEE RIAD W, SC 29429				
Current Mailing Address:			New Mailing Address:		
P.O. BOX MT. PLEA	460 SANT, SC 29	465			
FEI Number	: 57-0998901	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
		BLVD SUITE 106			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WAGNER, TOP 735 OLDE CEI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WAGNER, LEE 735 OLDE CEI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HENDRIX, THO PO BOX 510) Delete DMAS C ID, SC 294386	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEE ANN WAGNER SEC 05/20/2008