

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000269

Entity Name: S O S ROMANIA, CORP.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

1830 DIXIANA ST, APT 402  
HOLLYWOOD, FL 33020

## New Principal Place of Business:

## Current Mailing Address:

1830 DIXIANA ST, APT 402  
HOLLYWOOD, FL 33020

## New Mailing Address:

FEI Number: 02-0531392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COSTACHE, MIHAIL  
1830 DIXIANA ST, #402  
HOLLYWOOD, FL 33020 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MIHAIL, COSTACHE  
Address: 1830 DIXIANA ST #402  
City-St-Zip: HOLLYWOOD, FL 33020

Title: VPD ( ) Delete  
Name: NEACSU, MIHAI  
Address: 805 NE 8TH STREET  
City-St-Zip: HALLANDALE, FL 33009

Title: TSD ( ) Delete  
Name: COSTACHE, JULIANA  
Address: 1830 DIXIANA ST #402  
City-St-Zip: HOLLYWOOD, FL 33020

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TSD (X) Change ( ) Addition  
Name: COSTACHE, IULIANA  
Address: 1830 DIXIANA ST #402  
City-St-Zip: HOLLYWOOD, FL 33020

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIHAIL COSTACHE

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date