

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002284

FILED
Jul 31, 2010
Secretary of State

Entity Name: SOZO COMPLETE CENTER, INC.

Current Principal Place of Business:

4819 SHADYGLEN DR
LAKELAND, FL 33810

New Principal Place of Business:

Current Mailing Address:

4819 SHADYGLEN DR
LAKELAND, FL 33810

New Mailing Address:

P.O. BOX 3294
LAKELAND, FL 33815

FEI Number: 80-0374246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLON, NELIDIA
3514 SOUTHCREST BLVD
LAKELAND, FL 33812 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: P
Name: LOPEZ, CATRINA B
Address: 4819 SHADYGLEN DR
City-St-Zip: LAKELAND, FL 33810

Title: S
Name: BROWNING, ANGELA K
Address: P O BOX 790
City-St-Zip: LAKELAND, FL 33802

Title: T
Name: EDWARDS, LANETTE D
Address: P O BOX 790
City-St-Zip: LAKELAND, FL 33802

Title: VP
Name: CASTELLANAS, JESSICA
Address: 711 NCHESTNUT RD.
City-St-Zip: LAKELAND, FL 33815

Title: D
Name: COLON, NELIDIA
Address: 3514 SOUTHCREST BLVD
City-St-Zip: LAKELAND, FL 33812

I hereby 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 all other like empowered.

SIGNATURE: CATRINA LOPEZ

P

07/31/2010

Electronic Signature of Signing Officer or Director

Date