

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000035455

Entity Name: SORAVIS, INC.

FILED  
Apr 15, 2004  
Secretary of State

**Current Principal Place of Business:**

1922 NE 147 TERRACE  
NORTH MIAMI, FL 33181

**New Principal Place of Business:**

**Current Mailing Address:**

1922 NE 147 TERRACE  
NORTH MIAMI, FL 33181

**New Mailing Address:**

FEI Number: 65-1000590

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VITTANAKORN, SORAVIS  
1922 NE 147 TERRACE  
NORTH MIAMI, FL 33181

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: VITTANAKORN, SORAVIS  
Address: 1922 NE 147 TERRACE  
City-St-Zip: NORTH MIAMI, FL 33181

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SORAVIS VITTANAKORN

D

04/15/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date