

FILED  
Aug 29, 2003 8:00 am  
Secretary of State

08-29-2003 90094 015 \*\*\*150.00

FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

P.O. 010 0000 1529  
So Suni Room Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

20810 W- Dixie

3. Mailing Address

Suite, Apt. #, etc. Hm

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

No. Miami Beach FL

City & State

FL

4. FEI Number

65-10693B

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Stuart Socol

Street Address (P.O. Box Number is Not Acceptable)

883 Spinnaker Dr. W.

City

Hollywood

FL

Zip Code

33019

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

Stuart Socol  
8/18/03

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PRES	Stuart Socol	20810 W- Dixie Hm	No. Miami Beach FL 33140
DIR	IRW Socol	20810 W- Dixie Hm	No. Miami Beach FL 33140
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
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DO NOT WRITE  
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Stuart Socol

CR2ED34B (12/01)

*Attachment*

80142136

**A.R.S. & ASSOCIATES INC.**

Stuart Socol  
Andrew Socol, C.P.A.  
Robert Socol, M.S.T.

20810 West Dixie Highway  
North Miami Beach, FL 33180  
Telephone: (305)-653-7350  
Fax: (305) 653-5205

*August 19, 2003*

Fla. Dept. of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, FL 32314

Re : So Sumi Realty, Inc..

My client So Sumi Realty, Inc.. document #P01000002529  
did not receive the original 2003 Uniform Business Report. Enclosed is a check for the  
annual fee of \$150.00 and a handwritten report for the year 2003.

The correct address for all forms to be mailed is 883 Spinnaker Drive West., Hollywood,  
Florida 33019.

Please Review and Advise

Very Truly Yours,

  
Stuart Socol