

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000087269

Entity Name: SOSA FONG, INC.

FILED
Apr 12, 2006
Secretary of State

Current Principal Place of Business:

6014 US HWY 19 N.
#250
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

6014 US HWY 19 N.
#250
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number: 65-1137343 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: FONG, MICHAEL J
Address: 15243 EASTWOOD TRAIL
City-St-Zip: BROOKSVILLE, FL 34604

Title: VSD () Delete
Name: SOSA-FONG, GEORGINA
Address: 15243 EASTWOOD TRAIL
City-St-Zip: BROOKSVILLE, FL 34604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: GEORGINA SOSA-FONG

VSD

04/12/2006

Electronic Signature of Signing Officer or Director

_____ Date