## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P02000128460 1. Entity Name SYLVIA SOTO P.A.

FILED Apr 30, 2004 08:00 AM Secretary of State

Principal Place of Business

3240 RIVER BRANCH CIRCLE KISSIMMEE, FL 34741 Mailing Address

3240 RIVER BRANCH CIRCLE KISSIMMEE, FL 34741



04272004

No Chg-P

CR2E034 (10/03)

4. FEI Number 61-1433658

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SOTO, SYLVIA 3240 RIVER BRANCH CIRCLE KISSIMMEE, FL 34741

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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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent Signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Trust Fund Contrib			ing	\$5.00 May Be Added to Fees	,
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SOTO, SYLVIA 3240 RIVER BRANCH CIRCLE KISSIMMEE, FL 34741			1875-66-181-44-1800	
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12. I hereby certify that the information supplied with this tring goes 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 receives or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered

SIGNATURE:

URE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/04

Dautimo Ohono #