2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000052653

Entity Name: SOSA WHOLESALE ASSOCIATES, INC.

FORT LAUDERDALE, FL 33314

City-St-Zip:

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4701 SW 45TH STREET BUILDING 9 - BAY 20 FORT LAUDERDALE, FL 33314 **New Mailing Address: Current Mailing Address:** 4701 SW 45TH STREET BUILDING 9 - BAY 20 FORT LAUDERDALE, FL 33314 FEI Number: 57-7166385 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOSA, HECTOR 4701 ŚW 45TH STREET BUILDING 9 - BAY 20 FORT LAUDERDALE, FL 33314 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SOSA, HECTOR Name: Name: 4701 SW 45TH STREET, BLDG. 9 - BAY 20 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33314 City-St-Zip: Title: VSD () Delete Title: () Change () Addition PINA, MARIA CECILIA Name: Name: 4701 SW 45TH STREET, BLDG. 9 - BAY 20 Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: HECTOR SOSA MR 04/30/2007