

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000034684

Entity Name: SO-YOGA INC.

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9290 HAMMOCKS BLVD  
401  
MIAMI, FL 33196 US

**New Principal Place of Business:**

**Current Mailing Address:**

16335 SW 95 LANE  
MIAMI, FL 33196 US

**New Mailing Address:**

FEI Number: 20-2452884

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAGUILLARD, SORAYA  
16335 SW 95 LANE  
MIAMI, FL 33196 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DAGUILLARD, SORAYA  
Address: 16335 SW 95 LANE  
City-St-Zip: MIAMI, FL 33196 US

Title: VP D  
Name: SAINT-LOUIS, PATRICE  
Address: 16335 SW 95 LANE  
City-St-Zip: MIAMI, FL 33196 US

Title: ST  
Name: DAGUILLARD, SORAYA  
Address: 16335 SW 95 LANE  
City-St-Zip: MIAMI, FL 33196 US

I hereby 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 all other like empowered.

SIGNATURE: PATRICE SAINT-LOUIS

VP

02/21/2011

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

\_\_\_\_\_  
Date