## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000133892

PAPAKOSTAS, JOHN

2701 KAREN BLVD.

SEBRING, FL 33870

Name:

Address:

City-St-Zip:

Entity Name: AGIA SOFIA, INC

FILED Aug 21, 2009 Secretary of State

Entity Nar	me: AGIA SC	PFIA, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	IWY 27 NOR1 FL 33870	TH .					
Current Mailing Address:			New Maili	New Mailing Address:			
267 U.S. H SEBRING,	IWY 27 NOR1 FL 33870	тн					
FEI Number: 20-3589363 FEI Number Applied For ( )		FEI Number Not Applicable ( )		Certificate of Status Desired ( )			
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
267 U.S. H SEBRING, The above	TAS, MIKE IWY 27 NOR1 FL 33870  named entity of Florida.	TH US submits this statement for the	purpose of changing it	ts registered	office or registered agent, c	or both,	
SIGNATUR							
		nic Signature of Registered Ag	ent	Date			
Election Car		93(2)(b), F.S., the corporation did n ig Trust Fund Contribution ( ). CTORS:	·		S TO OFFICERS AND DIR	ECTORS:	
Title: Name: Address: City-St-Zip:	D ( PAPAKOSTAS 2701 KAREN I SEBRING, FL	BLVD.	Title: Name: Address: City-St-Zip:	(	) Change()Addition		
Title: Name: Address: City-St-Zip:	P ( PAPAKOSTAS 2701 KAREN I SEBRING, FL	BLVD.	Title: Name: Address: City-St-Zip:	PST ( PAPAKOSTAS 2701 KAREN SEBRING, FL	BLVD.		
Title <sup>.</sup>	ST ()	() Delete	Title <sup>.</sup>	(	) Change ( ) Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MIKE PAPAKOSTAS P 08/21/2009