

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000000435

Entity Name: SOFIA ASSOCIATES, INC.

**FILED**  
**Jan 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3706 MEADOWWOOD CT.  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 411825  
MELBOURNE, FL 329411825

**New Mailing Address:**

FEI Number: 14-1985060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SACCOMANNO, MARIE L  
3706 MEADOWWOOD CT.  
MELBOURNE, FL 32935 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: D  
Name: SACCOMANNO, NICHOLAS J  
Address: 3706 MEADOWWOOD CT.  
City-St-Zip: MELBOURNE, FL 32935

Title: D  
Name: SACCOMANNO, MARIE L  
Address: 3706 MEADOWWOOD CT.  
City-St-Zip: MELBOURNE, FL 32935

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: MARIE L. SACCOMANNO

PRES

01/30/2011

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

\_\_\_\_\_  
Date