

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000034355

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Entity Name:** SONOGRAPHIC SOLUTIONS, INC.

**Current Principal Place of Business:**

1218 SE 22ND TERRACE  
CAPE CORAL, FL 339904688

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOHN M WICKER, P.A.  
P O DRAWER 60205  
FORT MYERS, FL 33906

**New Mailing Address:**

1218 SE 22ND TERRACE  
CAPE CORAL, FL 339904688

**FEI Number:** 20-8669548

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WICKER, JOHN M  
12670 NEW BRITTANY BLVD  
SUITE 101  
FT MYERS, FL 33907 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: DPST  
Name: TSCHAPPAT, BRUCE A  
Address: 1218 SE 22ND TERRACE  
City-St-Zip: CAPE CORAL, FL 339904688

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: BRUCE TSCHAPPAT

DPST

03/14/2012

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

\_\_\_\_\_ Date