UNIFORM BUSINESS REPORT	RT-(UBR) ५३	TILED	
DOCUMENT #5 41249 1. Entity Name	19	02 APR 22 AM 11:00	
SOFIA CORP		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DO NOT WRITE IN THIS S	SPACE	TO COLE. PLOHIDA	
2. Principal Place of Business 7283 Town a CT 7283 Town	ga cT	·.	
Suite, Apt. #, etc. Suite, Apt. #, etc.	······································	DO NOT WRITE IN THIS SPACE 4 FFI Number Applied	Eor
By & State Beach F Bux Nton	Beach, FlA		licable
Zip 33437 Country Zip 33437	Country	Certificate of Status Desired	
DO NOT MOITE	Name	HOM TESSEL	
DO NOT WRITE IN THIS SPACE	-Street Address	ss (P.O. Box Number is Not Acceptable)	_
IN THIS SPACE	7283	3 Jonga Ct Howard FL Zip Code 3343	7
The above named entity submits this statement for the purpose of changing	g its registered office or register	· · · · · · · · · · · · · · · · · · ·	
SIGNATURE Sophia Jessel	NOTE: Registered Agent signature require	nuired when reinstating) DATE	_
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After N Ameri	- May 1 Fee is \$150.00 May 1, Fee is \$550.00 Ided UBR is \$61.25 Iyable to Department of St	10. Election Campaign Financing \$5.00 Mar Trust Fund Contribution. Added to Fe	
11. OFFICERS AND DIRECTORS		700005419337	3 8
TITLE NAME STREET ADDRESS 7383 TONGACT	TITLE NAME STREET ADDRESS CITY-SI-2IP	-05/02/0201011018 ****300.80 ****300.0	348 (12/01)
CITY-ST-ZIP BUTN TO A Beach F1 33437 TITLE ST	TITLE		CR2E034B
STREET ADDRESS DIANA GRADOS KY CITY-ST-ZIP 2857 LONOY S. [28755	NAME STREET ADDRESS CITY-ST-ZIP		
TITLE TOMS RIVER, NO	TITLE NAME		
STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP ** * *	DO NOT-WRITE	
TITLE NAME	TITLE NAME	IN THIS SPACE	
STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME	TITLE NAME		{
STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP		
13. I hereby certify that the information supplied with this filling does not qualifundicated on this report or supplemental report is true and accurate and the corporation or the receiver or trustee empowered to execute this reattachment with an address, with all other like empowered.	iy for the exemption stated in S nat my signature shall have the eport as required by Chapter	n Section 119.07(3)(i), Florida Statutes. I further certify that the informative same legal effect as if made under oath; that I am an officer or direct of core foot, Florida Statutes; and that my name appears in Block 11 or on Cell - 56/-445533	ation ector an
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFE	CER OR DIRECTOR	3-6-02 511-11915.52 Date Daythe Phone #	نخسسيني

April 16, 2002

Attn: Michelle Milligan

My name is Sophia Tessel and I want to thank you for taking your time to explained to me with the filling of the Sofia Corp.

On October of 2000, we moved to Boynton Beach, and never received any forms for the business report or a letter to notify me that is was not pay. We had all the mail forward to the new address but never received yours:

We appreciate if you waived the penalty, and I am enclosing check for the \$300.00 as you requested. Please in the future any mail should be send to me since my sister is in New Jersey and I am the one taking care. Now we should be updated until next year.again Again I want to thank you for your help

Sincerely,
Sophen Sessel

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