

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000059695

**Entity Name:** SONIA TELLO ALTERATIONS USA, INC

**Current Principal Place of Business:**

105 S 1ST STREET UNIT 7  
IMMOKALEE, FL 34142

**Current Mailing Address:**

4951 TAMIAMI TRAIL N  
103  
NAPLES, FL 34103

**FEI Number:** 87-1406775

**Certificate of Status Desired:** No

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

AXIOM ACCOUNTING PA  
4951 TAMIAMI TRAIL N  
103  
NAPLES, FL 34103 US

*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

**Officer/Director Detail :**

|                 |                            |                 |                            |
|-----------------|----------------------------|-----------------|----------------------------|
| Title           | P                          | Title           | VP                         |
| Name            | MORALES, ROSA E            | Name            | TELLO MORALES, SONIA M     |
| Address         | 1210 SHADY REST LN UNIT 10 | Address         | 1210 SHADY REST LN UNIT 10 |
| City-State-Zip: | NAPLES FL 34103            | City-State-Zip: | NAPLES FL 34103            |

*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:** ROSA ESTELA MORALES

P

04/26/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date