



BA20241684445

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**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**STATEMENT OF INFORMATION**  
**CORPORATION**

California Secretary of State  
 1500 11th Street  
 Sacramento, California 95814  
 (916) 657-5448

For Office Use Only

**-FILED-**

File No.: BA20241684445

Date Filed: 9/20/2024

Entity Details									
Corporation Name	SONIA FLORES LICENSED CLINICAL SOCIAL WORKER INCORPORATED								
Entity No.	6391848								
Formed In	CALIFORNIA								
Street Address of Principal Office of Corporation									
Principal Address	21515 HAWTHORNE BLVD STE 200 TORRANCE, CA 90503								
Mailing Address of Corporation									
Mailing Address	21515 HAWTHORNE BLVD STE 200 TORRANCE, CA 90503								
Attention	SONIA FLORES								
Street Address of California Office of Corporation									
Street Address of California Office	21515 HAWTHORNE BLVD STE 200 TORRANCE, CA 90503								
Officers									
<table border="1"> <thead> <tr> <th>Officer Name</th> <th>Officer Address</th> <th>Position(s)</th> </tr> </thead> <tbody> <tr> <td>+ SONIA FLORES</td> <td>21515 HAWTHORNE BLVD STE 200 TORRANCE, CA 90503</td> <td>Chief Executive Officer, Chief Financial Officer, Secretary</td> </tr> </tbody> </table>		Officer Name	Officer Address	Position(s)	+ SONIA FLORES	21515 HAWTHORNE BLVD STE 200 TORRANCE, CA 90503	Chief Executive Officer, Chief Financial Officer, Secretary		
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Additional Officers									
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Directors									
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Director Name	Director Address								
+ SONIA FLORES	21515 HAWTHORNE BLVD STE 200 TORRANCE, CA 90503								
The number of vacancies on Board of Directors is: 0									
Agent for Service of Process									
Agent Name	SONIA FLORES								
Agent Address	21515 HAWTHORNE BLVD STE 200 TORRANCE, CA 90503								
Type of Business									
Type of Business	SOCIAL WORKER								

Email Notifications	Opt-in Email Notifications	No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.
Labor Judgment	No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.	
Electronic Signature	<input checked="" type="checkbox"/> By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.	
<i>SONIA FLORES</i>	<i>09/20/2024</i>	
Signature	Date	