

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000074506

**Entity Name:** HERBAZEST INC.

**Current Principal Place of Business:**

5401 S KIRKMAN RD  
310  
ORLANDO, FL 32819

**Current Mailing Address:**

5401 S KIRKMAN RD  
310  
ORLANDO, FL 32819 UN

**FEI Number:** 47-1122666

**Certificate of Status Desired:** No

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

M. STEWART AND COMPANY  
570 LEXINGTON GREEN LANE  
SANFORD, FL 32771 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 PSTD  
Name KOECHLIN, ALFREDO  
Address 5401 S KIRKMAN RD  
City-State-Zip: ORLANDO FL 32819

Title VP  
Name KOECHLIN, ALVARO  
Address 5401 S KIRKMAN RD SUITE 310  
City-State-Zip: ORLANDO FL 32819

*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:** ALFREDO KOECHLIN

**PRESIDENT**

**03/07/2016**

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

\_\_\_\_\_  
Date