

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000085731

**Entity Name:** NATURAL JUICE, INC.

**Current Principal Place of Business:**

9618 8TH AVE  
ORLANDO, FL 32824

**Current Mailing Address:**

9618 8TH AVE  
ORLANDO, FL 32824 US

**FEI Number:** 32-0391173

**Certificate of Status Desired:** No

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

FILSAIME, LIFRANC  
9618 8TH AVE  
ORLANDO, FL 32824 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            DPT  
Name           FILSAIME, LIFRANC  
Address        9618 8TH AVE  
City-State-Zip: ORLANDO FL 32824

Title            DVPS  
Name           CHARLES-FILSAIME, MARTHA  
Address        9618 8TH AVE  
City-State-Zip: ORLANDO FL 32824

*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:** CHARLES-FILSAIME MARTHA

VP

04/30/2015

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

\_\_\_\_\_  
Date