## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038994

Entity Name: SOJA, LLC

FILED
Apr 28, 2014
Secretary of State
CC1785705678

## **Current Principal Place of Business:**

C/O MICHAEL MAZZOLA 278 ROUTE 202 SOMERS, NY 10589

## **Current Mailing Address:**

C/O MICHAEL MAZZOLA 278 ROUTE 202 SOMERS, NY 10589

FEI Number: 20-1056291 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CHIUMENTO, MICHAEL D 145 CITY PLACE SUITE 301 PALM COAST, FL 32164 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:

Address

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name LUPINACCI, NICHOLAS Name MAZZOLA, MICHAEL J

Address 5 SUMMER TERRACE Address 278 ROUTE 202

City-State-Zip: PALM COAST FL 32137 City-State-Zip: SOMERS NY 10589

Title MGRM Title MGRM

Name THE KRISTI A CHIUMENTO Name STAGLIANO, ANTHONY

REVOCABLE TRUST Address 29 CHEYENNE CRT

145 CITY PLACE
SUITE 301
City-State-Zip: PALM COAST FL 32137

SUITE 301 City-State-Zip: PALM COAST FL 3213 City-State-Zip: PALM COAST FL 32164

City-State-Zip: PALM COAST FL 32164

Title MGRM
Name BHPI CORP.

Address 2344 QUAKER CHURCH ROAD

City-State-Zip: YORKTOWN NY 10598

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL J MAZZOLA MEMBER 04/28/2014