

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 225514

FILED  
Apr 18, 2012  
Secretary of State

Entity Name: PRODUCE EXCHANGE CO INC

**Current Principal Place of Business:**

2801 E HILLSBOROUGH AVE  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 11115  
TAMPA, FL 33680

**New Mailing Address:**

FEI Number: 59-0873334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GRIZZAFFE, CHARLIE V.  
12001 N. BRIGHTWATER BLVD  
TAMPA, FL 33617 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DV  
Name: GUIDA, JAMES T  
Address: STATE FARMERS MARKET A-3  
City-St-Zip: POMPANO BEACH, FL 33061

Title: VD  
Name: GRIZZAFFE, JOHN T  
Address: 9116 ROBERTS RD.  
City-St-Zip: ODESSA, FL 33556

Title: PD  
Name: GRIZZAFFE, CHARLIE V  
Address: 12001 N. BRIGHTWATER BLVD  
City-St-Zip: TAMPA, FL 00000, 33617

Title: ST  
Name: FLEMING, VIRGINIA G  
Address: 8808 ROBERTS RD  
City-St-Zip: ODESSA, FL 33556

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: CHARLIE V GRIZZAFFE

PD

04/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date