

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 02, 2004 8:00 am**  
**Secretary of State**

08-02-2004 90007 002 \*\*\*150.00

**DOCUMENT # P02000035848**

1. Entity Name

**OCASIO PRODUCE SALES, INC.**



Principal Place of Business

**19365 FRESH LAKE WAY  
BOCA RATON, FL 33498**

Mailing Address

**19365 FRESH LAKE WAY  
BOCA RATON, FL 33498**

**54066099**



2. Principal Place of Business

**18365 FRESH LAKE WAY**

Suite, Apt. #, etc.

3. Mailing Address

**18365 FRESH LAKE WAY**

Suite, Apt. #, etc.

07222004

Chg-P

CR2E034 (10/03)

City & State

**BOCA RATON, FL.**

City & State

**BOCA RATON, FL.**

4. FEI Number

**02-0600174**

Applied For

Not Applicable

Zip

**33498**

Country

**USA**

Zip

**33498**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**PERRY, MARK A  
50 SE FOURTH AVE  
DELRAY BEACH, FL 33483**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PSTD.  
OCASIO, CARLOS  
327 FORESTA TERR  
WEST PALM BEACH, FL 33415** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
OCASIO, CARLOS  
18365 FRESH LAKE WAY  
BOCA RATON, FL. 33498** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP/S/T  
OCASIO, SHOSHANNAH  
18365 FRESH LAKE DRIVE  
BOCA RATON, FL. 33498** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*C. Ocasio* **Carlos Ocasio, President**

Date

**7-29-04 561)644-1676**

Daytime Phone #