

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 619262

**Entity Name:** PILA & PILA, INC.

**Current Principal Place of Business:**

4308 SOUTHPARK DR  
TAMPA, FL 33624

**Current Mailing Address:**

4308 SOUTHPARK DR  
TAMPA, FL 33624 US

**FEI Number:** 59-1906729

**Certificate of Status Desired:** No

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

PILA, MORITZ  
4308 SOUTHPARK DR.  
TAMPA, FL 33624 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 S  
Name PILA, HARRIET  
Address 321 GORDON AVENUE  
City-State-Zip: SAN JOSE CA 95127-1612

Title VP  
Name PILA, ESTHER  
Address 934 NW 58TH STREET  
City-State-Zip: SEATTLE WA 98107

Title P  
Name PILA, KALMAN  
Address 4234 WINDING WILLOW DR.  
City-State-Zip: TAMPA FL 33624-4664

Title TD  
Name PILA, MORITZ  
Address 4308 SOUTHPARK DR.  
City-State-Zip: TAMPA FL 33624-3417

Title VP  
Name PILA, BERNADETTE  
Address 934 NW 58TH STREET  
City-State-Zip: SEATTLE WA 98107

*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:** MORITZ PILA

**TREASURER**

**01/12/2017**

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

\_\_\_\_\_  
Date