

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K59977

**Entity Name:** TOCHNER CORPORATION

**Current Principal Place of Business:**

885 FATHOM RD.  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

885 FATHOM RD.  
NORTH PALM BEACH, FL 33408 US

**FEI Number:** 65-0095458

**Certificate of Status Desired:** No

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

MAX TOCHNER  
885 FATHOM RD  
NORTH PALM BEACH, FL 33408 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	PVD	Title	ST
Name	TOCHNER, MAX	Name	TOCHNER, MAX
Address	885 FATHOM RD	Address	885 FATHOM RD
City-State-Zip:	NORTH PALM BEACH FL 33408	City-State-Zip:	NORTH PALM BEACH FL 33408

*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:** MAX TOCHNER

**PRESIDENT**

**04/21/2013**

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

\_\_\_\_\_  
Date