

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000112555

**Entity Name:** PEDRO JOSEPHINE & SONS, INC.

**Current Principal Place of Business:**

1085 EAST MAIN STREET  
BARTOW, FL 33830

**Current Mailing Address:**

PO BOX 41  
BARTOW, FL 33831

**FEI Number:** 20-3336756

**Certificate of Status Desired:** Yes

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

CATI, PEDRO  
1085 EAST MAIN STREET  
BARTOW, FL 33830 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	PSD	Title	VTD
Name	CATI, PEDRO	Name	CATI, JOSEPHINE
Address	1085 EAST MAIN STREET	Address	1085 EAST MAIN STREET
City-State-Zip:	BARTOW FL 33830	City-State-Zip:	BARTOW FL 33830

*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:** PEDRO CATI

**PRESIDENT**

**01/10/2014**

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

\_\_\_\_\_  
Date