

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000008163

**Entity Name:** BOFRESCO INC.

**Current Principal Place of Business:**

7352 CINNAMON LAKE DR  
JACKSONVILLE, FL 32244

**Current Mailing Address:**

PO BOX 441091  
JACKSONVILLE, FL 32222

**FEI Number: 90-0435894**

**Certificate of Status Desired:** No

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

COX, JOSEPH  
7352 CINNAMON LAKE DR  
JACKSONVILLE, FL 32244 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 D  
Name FAUSTO, JULIUS  
Address 8111 CUMBERLAND GAP TR  
City-State-Zip: JACKSONVILLE FL 32258

Title D  
Name DECASTRO, VLADIMIR  
Address 12700 BARTRAM PARK BLVD #731  
City-State-Zip: JACKSONVILLE FL 32258

Title D  
Name COX, JOSEPH  
Address 7352 CINNAMON LAKE DR  
City-State-Zip: JACKSONVILLE FL 32244

*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: JOSEPH COX**

**DIRECTOR**

**04/23/2016**

Electronic Signature of Signing Officer/Director Detail

Date