

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000085731

**Entity Name:** NATURAL JUICE, INC.

**Current Principal Place of Business:**

2500 10TH AVENUE NORTH  
105A  
LAKE WORTH, FL 33461

**FILED**  
**Apr 23, 2014**  
**Secretary of State**  
**CC0020252305**

**Current Mailing Address:**

39 3RD ST SW  
207  
WINTER HAVEN, FL 33880 US

**FEI Number: 32-0391173**

**Certificate of Status Desired: Yes**

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

FILSAIME, LIFRANC  
2500 10TH AVENUE NORTH  
105A  
LAKE WORTH, FL 33461 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           DPT  
Name           FILSAIME, LIFRANC  
Address        PO BOX 3125  
City-State-Zip: BOYNTON BEACH FL 33424

Title           DVPS  
Name           CHARLES-FILSAIME, MARTHA  
Address        PO BOX 3125  
City-State-Zip: BOYNTON BEACH FL 33424

*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: LIFRANC FILSAIME**

**OWNER**

**04/23/2014**

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

\_\_\_\_\_  
Date