

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000030674

Entity Name: JOSEPH RAISSI & COMPANY, INC.**Current Principal Place of Business:**6500 CENTRAL AVENUE
SAINT PETERSBURG, FL 33707**Current Mailing Address:**6500 CENTRAL AVENUE
SAINT PETERSBURG, FL 33707 US**FEI Number:** 59-3236059**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAISSI, JOSEPH
6500 CENTRAL AVE
SAINT PETERSBURG, FL 33707 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	PC
Name	RAISSI, JOSEPH
Address	7651 128TH STREET NORTH
City-State-Zip:	SEMINOLE FL

Title	T
Name	NELSON, VICTORIA E
Address	7651 128TH STREET NORTH
City-State-Zip:	SEMINOLE FL 33776

Title	V
Name	RAISSI, ALANNA S
Address	7651 128TH STREET NORTH
City-State-Zip:	SEMINOLE FL 33776

Title	V
Name	RICHIE, ALEXANDRIA C
Address	7651 128TH STREET NORTH
City-State-Zip:	SEMINOLE FL 33776

Title	S
Name	DREGER, JULIETTE I
Address	7651 128TH STREET NORTH
City-State-Zip:	SEMINOLE FL 33776

Title	V
Name	RAISSI, JAIDYN L
Address	7651 128 STREET NORTH
City-State-Zip:	SEMINOLE FL 33776

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 RAISSI**PRESIDENT****04/24/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date