

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S98293

**Entity Name:** TORCISE BROS. FARMS, INC.

**Current Principal Place of Business:**

15600 SW 288 STREET  
SUITE 310  
HOMESTEAD, FL 33030

**Current Mailing Address:**

15600 SW 288 STREET  
SUITE 310  
HOMESTEAD, FL 33030 US

**FEI Number:** 65-0310251

**Certificate of Status Desired:** No

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

JOHN P MAAS, P.A.  
44 N E 16TH STREET  
HOMESTEAD, FL 33030 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 CO-  
PRESIDENT/TREASURER/DIRECTOR  
Name FULLER, SANDRA T.  
Address 6895 SW 112 STREET  
City-State-Zip: MIAMI FL 33156

Title CO-  
PRESIDENT/SECRETARY/DIRECTOR  
Name TORCISE, STEFANO J.  
Address 15600 SW 288 STREET  
SUITE 310  
City-State-Zip: HOMESTEAD FL 33030

*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:** STEFANO J. TORCISE

**CO-PRESIDENT**

**04/27/2021**

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

\_\_\_\_\_  
Date