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: STEVE TORCISE

Electronic Signature of Signing Officer/Director Detail

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S98293

Entity Name: TORCISE BROS. FARMS, INC.

Current Principal Place of Business:

17900 SW 288TH ST HOMESTEAD, FL 33030

Current Mailing Address:

17900 SW 288TH ST HOMESTEAD, FL 33030

FEI Number: 65-0310251

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 submi ida.

SIGNATURE:

Electron

Officer/Director Deta

Title	PRES	Title	D
Name	TORCISE, STEVE SR	Name	TORCISE, JOYCE
Address	17900 SW 288TH ST	Address	17900 SW 288TH ST
City-State-Zip:	HOMESTEAD FL 33030	City-State-Zip:	HOMESTEAD FL 33030

nits this statement for the purpose of changing its regist	ered office or regis	tered agent, or both, in the State of Florid
onic Signature of Registered Agent		
ail :		
	Titlo	П

PRESIDENT

04/27/2018 Date

FILED Apr 27, 2018 Secretary of State CC1482977168

Certificate of Status Desired: No

Date