

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 06, 2003 8:00 am
Secretary of State

01-06-2003 90038 039 ***150.00

DOCUMENT # P02000078285

1. Entity Name

My Brothers Coffee Company, Inc.

DO NOT WRITE IN THIS SPACE

40000151

2. Principal Place of Business

PO Box 151053

Suite, Apt. #, etc.

3. Mailing Address

PO Box 151053

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Cape Coral FL

City & State

Cape Coral, FL

4. FEI Number

82-0554931

Applied For

Not Applicable

Zip

33915

Country

LEE

Zip

33915

Country

LEE

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Steven C Simmons

Street Address (P.O. Box Number is Not Acceptable)

914 SW 19th Lane

City

Cape Coral

FL

Zip Code

33991

**DO NOT WRITE
IN THIS SPACE**

8. 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

Steven C Simmons

Steven C Simmons

1-1-2003

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
President, Treasurer, Director	Steven Simmons	914 SW 19th Lane	Cape Coral, FL 33991				
Vice President	Michael Simmons	414 SW 19th Lane	Cape Coral, FL 33991				
Secretary	Machelle Simmons	914 SW 19th Lane	Cape Coral, FL 33991				

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Steven Simmons

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-1-2003

Date

239-574-4915

Daytime Phone #

CR2E034B (12/01)