

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # F04000003797

1. Entity Name
COFFEE KULTURE INC.



Principal Place of Business
**1908 BEATRICE DRIVE
ORLANDO, FL 32810**

Mailing Address
**1908 BEATRICE DRIVE
ORLANDO, FL 32810**



03152007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
33-1045098

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DUARTE, DEBRA
1980 NE 180TH ST
NORTH MIAMI BEACH, FL 33162**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PTVC
KEARNEY, KENNETH III
1908 BEATRICE DR
ORLANDO, FL 32810**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
KEARNEY, KENNETH III
1908 BEATRICE DR
ORLANDO, FL 32810**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VSCD
LOVELY, ADRIAN
1908 BEATRICE DR
ORLANDO, FL 32810**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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05/01/07-80117-002 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Adrian Lovely
April 21st 07
Date
407-310-2944
Perkins Stone 407-310-2944