

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000003538

**Entity Name:** MERCON COFFEE CORPORATION

**Current Principal Place of Business:**

2333 PONCE DE LEON BLVD  
SUITE 600  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2333 PONCE DE LEON BLVD  
SUITE 600  
CORAL GABLES, FL 33134 US

**FEI Number:** 13-3121844

**Certificate of Status Desired:** Yes

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

C T CORPORATION SYSTEM  
1200 S PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DIRECTOR  
Name BALTODANO, J. ANTONIO  
Address 2132 TIGERTAIL AVENUE  
City-State-Zip: COCONUT GROVE FL 33134

Title DIRECTOR  
Name CHAMORRO, LUIS A  
Address 2333 PONCE DE LEON BLVD  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name BALTODANO, DUILIO P  
Address 2333 PONCE DE LEON BLVD  
City-State-Zip: CORAL GABLES FL 33134

Title COO  
Name IBARRA, JUAN P  
Address 2333 PONCE DE LEON BLVD  
City-State-Zip: CORAL GABLES FL 33134

Title CEO  
Name SEVILLA, OSCAR  
Address 2333 PONCE DE LEON BLVD  
SUITE 600  
City-State-Zip: CORAL GABLES FL 33134

*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:** JUAN PABLO IBARRA

**SECRETARY**

**04/04/2017**

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

\_\_\_\_\_  
Date