

**2023 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F93000003538

**Entity Name:** MERCON COFFEE CORPORATION**Current Principal Place of Business:**999 PONCE DE LEON BLVD  
SUITE 910  
CORAL GABLES, FL 33134**Current Mailing Address:**999 PONCE DE LEON BLVD  
SUITE 910  
CORAL GABLES, FL 33134 US**FEI Number:** 13-3121844**Certificate of Status Desired:** No**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	CHAMORRO, LUIS A
Address	999 PONCE DE LEON BLVD SUITE 910
City-State-Zip:	CORAL GABLES FL 33134
Title	CEO, PRESIDENT, ASST. SECRETARY
Name	SEVILLA, OSCAR
Address	999 PONCE DE LEON BLVD SUITE 910
City-State-Zip:	CORAL GABLES FL 33134
Title	DIRECTOR, EXECUTIVE VICE PRESIDENT
Name	GIBBONS, JOHN
Address	999 PONCE DE LEON BLVD SUITE 910
City-State-Zip:	CORAL GABLES FL 33134

Title	COO, EXECUTIVE VICE PRESIDENT, CFO, SECRETARY
Name	IBARRA, JUAN P
Address	999 PONCE DE LEON BLVD SUITE 910
City-State-Zip:	CORAL GABLES FL 33134
Title	DIRECTOR, CHAIRMAN
Name	FRATES, DUNCAN
Address	999 PONCE DE LEON BLVD SUITE 910
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

COO

10/05/2023

Electronic Signature of Signing Officer/Director Detail

Date