

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 263701 (5)

1. Corporation Name

Q + P Coffee Inc.

Principal Place of Business

Mailing Address

8080 NW. 58th St.
Miami, FL 33166

8080 NW. 58th St.
Miami, FL 33166

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

Jose M. Marquez, Esq.
780 NW. LeJeune Rd. #400
Miami, FL 33126

3. Date Incorporated or Qualified

3a. Date of Last Report

10/16/62

6/19/95

4. FEI Number

Applied For

59-0797414

Not Applicable

5. Certificate of Status Desired

[]

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

[]

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032
Florida Statutes

[X] Yes

[] No

10. Name and Address of New Registered Agent

81 Name

Ana S. Vila

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

83

520 Biltmore Way

84 City

Coral Gables

FL

85 Zip Code

33134

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept if appointed as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Ana S. Vila

4/22/96

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

(NOTE: Registered Agent's signature required when not signing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME Jose Angel Souto
STREET ADDRESS 605 Solano Prado
CITY, ST, ZIP Coral Gables, FL 33136

TITLE
NAME Ira Butt
STREET ADDRESS 6301 Sunset Drive #203
CITY, ST, ZIP Miami FL

TITLE
NAME PD Felix Clemarces
STREET ADDRESS 3163 S.W. 23 Terrace
CITY, ST, ZIP Miami FL

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

21 TITLE
22 NAME Jose Angel Souto
23 STREET ADDRESS 605 Solano Prado
24 CITY, ST, ZIP Coral Gables, FL 33136

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jose Souto

4/22/96

(305) 594-9039

(305) 594-9039

CR2E034 (12/95)