

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F94000005695 (1)

1. Corporation Name
JAVA RESERVATIONS, INC.

Principal Place of Business

1370 WASHINGTON
SUITE 301
MIAMI BEACH FL 33139

Mailing Address

1370 WASHINGTON
SUITE 301
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/02/1994

4. FEI Number

36-3707130

Applied For

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business
21 1680 MERIDIAN AVE.

Suite, Apt. #, etc.

22 SUITE 504

City & State

23 MIAMI BEACH, FL

Zip

24 33139-2709

Country

25 USA

2a. Mailing Address

26 1680 MERIDIAN AVE

Suite, Apt. #, etc.

27 SUITE 504

City & State

28 MIAMI BEACH, FL

Zip

29 33139-2709

Country

30 USA

9. Name and Address of Current Registered Agent

SCHWARTZ, FRED
1370 WASHINGTON
SUITE 301
MIAMI BEACH FL 33139

(change of
address
only)

10. Name and Address of New Registered Agent

81 Name

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

1680 MERIDIAN AVE.

83

SUITE 504

84

City
MIAMI BEACH

FL

85 Zip Code

33139-2709

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 the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME SCHWARTZ, FRED
STREET ADDRESS 1370 WASHINGTON, SUITE 301
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE SD ☐ DELETE

NAME DORMAN, MICHAEL
STREET ADDRESS 1501 W. FULLERTON
CITY-ST-ZIP CHICAGO IL 80614

TITLE V ☐ DELETE

NAME CANNIZZO, VICKIE
STREET ADDRESS 1370 WASHINGTON, SUITE 301
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1680 MERIDIAN AVE., SUITE 504
MIAMI BEACH, FL 33139-2709

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

1680 MERIDIAN AVENUE, SUITE 504
MIAMI BEACH, FL 33139-2709

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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:

Vicki Cannizzo

2/27/98

CFR034 (1097)