

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003476

1. Entity Name

COFFEE AMERICA (USA) CORPORATION

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90039 042 ***150.00

Principal Place of Business

Mailing Address

161 MAIDEN LANE
NEW YORK NY 10038

161 MAIDEN LANE
NEW YORK NY 10038-4967

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-3678453

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C ☐ Delete
NAME DE SOLA, HERBERT
STREET ADDRESS 161 MAIDEN LANE
CITY-ST-ZIP NEW YORK NY 10038

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PCEO ☐ Delete
NAME EMANUELE, RICHARD
STREET ADDRESS 161 MAIDEN LANE
CITY-ST-ZIP NEW YORK NY 10038

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VCFO ☐ Delete
NAME KEAVENEY, WILLIAM P
STREET ADDRESS 161 MAIDEN LANE
CITY-ST-ZIP NEW YORK NY 10038

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME SCHWARTZ, RICARDO
STREET ADDRESS 161 MAIDEN LANE
CITY-ST-ZIP NEW YORK NY 10038

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME HOGAN, THOMAS
STREET ADDRESS 161 MAIDEN LANE
CITY-ST-ZIP NEW YORK NY 10038

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME PIVARAL, MARIO ROBERTO L
STREET ADDRESS 161 MAIDEN LANE
CITY-ST-ZIP NEW YORK NY 10038

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WILLIAM P. KEAVENEY
SENIOR VICE PRESIDENT

MAR 13 2000

Date

Daytime Phone #