

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J79652

FILED
Jan 12, 2004
Secretary of State

Entity Name: PREMIUM COFFEE SERVICE OF FLORIDA, INC.

Current Principal Place of Business:

12452 SW 117 CT
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 56-0991
MIAMI, FL 332560991 US

New Mailing Address:

FEI Number: 65-0134733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRISTAL, ALAN J
12452 SW 117TH CT
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FIRESTONE, MARJORIE E
Address: P.O. BOX 56-0991 N/A
City-St-Zip: MIAMI, FL 33256

Title: SCD () Delete
Name: KRISTAL, CHERYL J
Address: P.O. BOX 56-0991
City-St-Zip: MIAMI, FL 332560991

Title: VD () Delete
Name: FIRESTONE, MARTIN J
Address: P.O. BOX 56-0991
City-St-Zip: MIAMI, FL 33256

Title: TD () Delete
Name: KRISTAL, ALAN J
Address: P.O. BOX 56-0991
City-St-Zip: MIAMI, FL 33256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CHERYL J. KRISTAL

SCD

01/12/2004

Electronic Signature of Signing Officer or Director

Date