

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 10, 2004  
Secretary of State**

DOCUMENT# K07450

Entity Name: COFFEECOL, INC.

**Current Principal Place of Business:**

1309 SOUTH DIXIE HIGHWAY  
SUITE 1204  
MIAMI, FL 33146 US

**New Principal Place of Business:**

1390 SOUTH DIXIE HIGHWAY  
SUITE 1204  
MIAMI, FL 33146 US

**Current Mailing Address:**

1309 SOUTH DIXIE HIGHWAY  
SUITE 1204  
MIAMI, FL 33146 US

**New Mailing Address:**

1390 SOUTH DIXIE HIGHWAY  
SUITE 1204  
MIAMI, FL 33146 US

FEI Number: 65-0025566

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEVENTHAL, MARKHAM  
777 BRICKELL AVENUE  
SUITE 500  
MIAMI, FL 33131 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTSD ( ) Delete  
Name: GAVIRIA, ANDRES  
Address: 1201 PLACENTAS AV.  
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete  
Name: GAVIRIA, GUSTAVO  
Address: 1201 PLACENTAS AV.  
City-St-Zip: CORAL GABLES, FL 33146

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ANDRES GAVIRIA

PTDS

05/10/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date