

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K07450

FILED
Feb 17, 2005
Secretary of State

Entity Name: COFFEECOL, INC.

Current Principal Place of Business:

1390 SOUTH DIXIE HIGHWAY
SUITE 1204
MIAMI, FL 33146 US

New Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE
SUITE 801
MIAMI, FL 33133 US

Current Mailing Address:

1390 SOUTH DIXIE HIGHWAY
SUITE 1204
MIAMI, FL 33146 US

New Mailing Address:

2665 SOUTH BAYSHORE DRIVE
SUITE 801
MIAMI, FL 33133 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

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

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: MARANO, THOMAS
Address: 2665 SOUTH BAYSHORE DR SUITE 801
City-St-Zip: COCONUT GROVE, FL 33133

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

Title: O () Change (X) Addition
Name: GAVIRIA, ANDRES
Address: 1201 PLACENTAS AVE
City-St-Zip: CORAL GABLES, FL 33146

Title: O () Change (X) Addition
Name: FONNEGRA, MARGARITA
Address: 2665 SOUTH BAYSHORE DR SUITE 801
City-St-Zip: COCONUT GROVE, FL 33133

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: MARGARITA FONNEGRA

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02/17/2005

Electronic Signature of Signing Officer or Director

Date