2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# L04000049802

Entity Name: MOUNT KENYA COFFEE COMPANY, LLC

Current Principal Place of Business:

10760 BISCAYNE BLVD.
NORTH MIAMI, FL 33161

New Principal Place of Business:

11900 BISCAYNE BLVD.
SUITE 620
MIAMI, FL 33181

Current Mailing Address:

10760 BISCAYNE BLVD.
NORTH MIAMI, FL 33161

New Mailing Address:

11900 BISCAYNE BLVD.
SUITE 620
NORTH MIAMI, FL 33181

FEI Number: 16-1703067 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
103 NORTH MERIDIAN STREET
TALLAHASSEE, FL 32301 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: GULILAT, BENJAMIN
Address: 780 NE 69TH STREET, APT. 1607
City-St-Zip: MIAMI, FL 33138

Title: MGRM ( ) Delete
Name: COSTLEY, JANON
Address: 1504 BAY ROAD, SUITE 2404
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: COSTLEY, JANON
Address: 11900 BISCAYNE BLVD-620
City-St-Zip: MIAMI, FL 33181

Title: MGRM (X) Change ( ) Addition
Name: COSTLEY, JANON
Address: 11900 BISCAYNE BLVD - 620
City-St-Zip: MIAMI, FL 33181

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JANON COSTLEY MGRM 04/27/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date