

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085568

Entity Name: HABANA COFFEE, LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

S 18 DE VILLERS
PENSACOLA, FL 32502

New Principal Place of Business:

601 NW 3RD AVE
FLORIDA CITY, FL 30034

Current Mailing Address:

S 18 DE VILLERS
PENSACOLA, FL 32502

New Mailing Address:

USNH
BOX 13
FPO, EA 09589

FEI Number: 74-3189086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFITHS, JOHN L
1929 CORAL ISLAND RD
PENSACOLA, FL 32506 US

Name and Address of New Registered Agent:

GRIFFITHS, JOHN L MR
601 NW 3RD AVE
FLORIDA CITY, FL 30034 US

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: JOHN L GRIFFITHS

03/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GRIFFITHS, JOHN L
Address: 1929 CORAL ISLAND RD
City-St-Zip: PENSACOLA, FL 32506

Title: MGRM () Delete
Name: HUGHES, TONY DR
Address: 304 INTERBAY AVE
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GRIFFITHS, JOHN L MR
Address: 601 NW 3RD AVE
City-St-Zip: FLORIDA CITY, FL 30034

Title: MGRM (X) Change () Addition
Name: HUGHES, TONY J DR
Address: 304 INTERBAY AVE
City-St-Zip: PENSACOLA, FL 32507

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN L GRIFFITHS

MGR

03/20/2009

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