FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 05 1998 8:00am

Sandra B. Mortham

7	1998		TIEL	D		CORPORAT	IONS	Secret	ary o	1 2	state	/
DOCUI 1. Corporatio H & R	MENT In Name COFFEE (32		(6)			1 120/00/H HI 12000 (4:0) 15/10 (HIS H	EL BURNI BIRNI BIRNI	1 24 0 11 0 10		
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Principal Plac	e of Business		ħ	đailing Add	ress			I LAGRICON 141 NOSOL SEIDI IDLEE ELISTE SL	DI MINEE MINIE RIMII	41811 6181	A BIBIT 1881	
C/O H & R COFFEE CO				2936 DAWN ROAD 1 0284 BICTREE OIF -W				1				
2936 DAWN RD JACKSONVILLE FL 32207				JACKSONNI JOSEP DICE	H LE VIIP W ULS FL 0020	17		DO NOT WRITE	IN THIS SPAI	CE		
US				US		,		3. Date incorporated or Qualified				٦
	-							05/02/1988				
2. Principal P	lace of Busin	ess)	, Mailing A	ddress	7)	. 21	4. FEI Number		-	plied For]
Suite, Apt.	# etc		26	Suite, Ap	2734	Jaw	<u>L rex .</u>	59-2893075	<u> </u>		t Applicable	4
22	π, οι ο.		27	1/27		inrose	Court	5. Certificate of Status Desired		Fee Re	Additional equired	
City & State	e			City & St	ate			Election Campaign Financing	·		May Be	1
23			28	Jac	LSON U	<u>'//e_F</u>	Florido	Trust Fund Contribution		Added t		╛
Zip	1	Country	\vdash	Zip	A	Countr	У	a. This corporation owes or has pa				
24		end Address of Curr	29			30		Personal Property Tax due June 10. Name and Address of New Re			No	4
HE	EKIN, T. GE		ont tiogn	atereo Age	711.	8.	Name	10. Hame and Address of Hew No	Aratolog Maoi	<u> </u>		\exists
	75 DIX ELLIS					-	N 01 A	(D.O. D., N.,	1-5			4
	ITE 401					83	Street Add	ress (P.O. Box Number is Not Acceptat	ole)			
JAC	CK SO NVILLI	FL 32256				83	3					1
						84	City		85	Zip (Code	\dashv
	 									,		_
11. Pursuant office or re	to t ne provision registered age	ons of Soctions 607.05 int, or both, in the Sta	e of Flor	607.1508, F ida, Such d	lorida Statu hange was	les, the above	/e-named corpora	poration submits this statement for the p tion's board of directors. I hereby accep	iurpose of cha of the appointr	nging its nent as	s registered registered	
	ım familiar witi	n, and accept the obli	gations c	of, Section (607. 0505 , FI	lorida Statute	BS.				-	
SIGNATURE	Signature, typed o	r printed name of registered a	ger/ and tilk	ie il applicable.	(NO	TE: Registered Aç	gent signature requi	ired when reinstating)	DATE			
12.		OFFICERS A	ND DIRE			13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIF	ECTOR	S IN 12	
TITLE	POT				DELETE	1.1 TITLE				Change	Addition	1
NAME	2936 DA	', SUSAN L.				1.2 NAME						3
STREET ADDRESS		WILLE FL					T ADDRESS					ļ
CITY-ST-ZIP TITLE	WACKSO!	WILLE I'L	· · · · · ·		DELETE	1.4 CITY- 2.1 TITLE	ST-ZIP	× ·		Change	Addition	-18
NAME	•			_	J 000000	2.2 NAME			_	Jilongo .		
STREET ADDRESS							T ADDRESS					
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TITLE					DELETE	3.1 TITLE				Change	Addition	7
NAME						3.2 NAME						
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CITY-ST-ZIP TITLE				-	DELETE	3.4. CITY - 4.1 TITLE	-ŜT-ZIP			Change	Addition	4
NAME				L.) DECEME	4.1 TILLE				Jirango	☐ Modition	
STREET ADDRESS							T ADDRESS					
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TITLE					DELETE	5.1 TITLE				Change	Addition	1
NAME						5.2 NAME						
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CITY-ST-ZIP					l neue	5.4 CITY-	ST-ZIP		····	<u> </u>	T 4 - 101	4
TITLE				L	DELETE	6.1 TITLE			Ļ	Change	Addition	1
NAME CIRCL ADDRESS						6.2 NAME						
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the received in this state empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address