

2001 UNIFORM BUSINESS REPORT (UBR)

1002

DOCUMENT # P00000090188

1. Entity Name
JAVA CAFE, INC.

FILED

01 OCT -3 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

800 WEST 42ND STREET NO 4-A
MIAMI BEACH FL 33140

Mailing Address

800 WEST 42ND STREET NO 4-A
MIAMI BEACH FL 33140

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FELDMAN, CHANA S

800 WEST 42ND STREET NO 4-A
MIAMI BEACH FL 33140

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME FELDMAN, CHANA S
STREET ADDRESS 800 WEST 42ND STREET NO 4-A
CITY-ST-ZIP MIAMI BEACH FL 33140

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STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

2002

Div. of Corp.

P.O. Box 6327, Tallahassee, FL.

32319

Rq. # : P00000090188

Subject: Your letter dated Sept. 11, 2001

I apologize for not stating clear enough that we did not receive the original UBR. I tried to state this in my letter dated 08-31-01. Again, we apologize for the delay, and since we did not receive the ^{original} UBR, we ask that the \$400 late fee be waived.

Thank you very much.

Chana S. Feldman
Chana S. Feldman