

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 01, 2002 8:00 am
Secretary of State

07-01-2002 90310 022 ***558.75

DOCUMENT # P01000118703

1. Entity Name

IN HOUSE COFFEE CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

700 E. Dania Beach Blvd.

3. Mailing Address

700 E. Dania Beach Blvd.

Suite, Apt. #, etc.

Third Floor

Suite, Apt. #, etc.

Third Floor

City & State

Dania Beach, Florida

City & State

Dania Beach, Florida

4. FEI Number

27-0017764

Applied For

Not Applicable

Zip
33004

Country
US

Zip
33004

Country
US

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MUTAZ TAKIDIN

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

700 East Dania Beach Boulevard

Third Floor

City

Dania Beach

FL

Zip Code
33004

**DO NOT WRITE
IN THIS SPACE**

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

Mutaz Takidin

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

(NOTE: Registered Agent signature required when reinstating)

June 24, 2002

DATE

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
MUTAZ TAKIDIN
700 E. Dania Beach Blvd. Third Fl.
Dania Beach, FL 33004

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 24, 2002 954-920-2921

Date

Daytime Phone #

CR2E034B (12/01)

DOCUMENT 319504 ✓
SP-1 Name
HARVEST VILLAGE NATURAL FOODS, INC.

DOCUMENT
1. Effort

319504

HARVEST VILLAGE NATURAL FOODS, INC.

HARVEST VILLAGE & NATURAL FOODS INC.
1928 HARRISON ST.
HOLLYWOOD FL 33020

Mailing Address
1928 HARRISON STREET
HOLLYWOOD FL 33020-5018

OFFICERS AND CREW

OFFICERS AND DIRECTORS		12
VP WHEATLEY, JAMES H 316 UTAH AVE FT. LAUDERDALE FL 33312	<input type="checkbox"/> Delete	TITLE NAME STREET CITY
P SCOTT, BETTY JEAN 1928 HARRISON STREET HOLLYWOOD FL 33020	<input type="checkbox"/> Delete	TITLE NAME STREET CITY
S WHEATLEY, SHIRLEY H 316 UTAH AVE FT. LAUDERDALE FL 33312	<input type="checkbox"/> Delete	TITLE NAME STREET CITY
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP

LAW OFFICES
RYAN & RYAN, P.A.
THIRD FLOOR
700 EAST DANIA BEACH BOULEVARD
DANIA BEACH, FLORIDA 33004-3090

Attachment
Document #
PO1000118703
118820

ARCHIE J. RYAN III
TIMOTHY M. RYAN
CHRISTOPHER J. RYAN
HOWARD E. ENRIQUE
JOSHUA S. PINSKY

**Board Certified City,
County and Local
Government Lawyer*

TELEPHONE (954) 920-2921
FACSIMILE (954) 921-1247

June 25, 2002

Uniform Business Report
Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500


Re: In House Coffee Corporation
Our File Number : 17841-C

Gentlemen:

Enclosed please find a fully executed Uniform Business Report (UBR) executed by Mutaz Takidin for In House Coffee Corporation, together with our Trust Account Check Number 16787, payable to the Florida Department of State in the sum of \$558.75, in payment of the annual fee and reinstatement fee of \$550.00 and the \$8.75 fee for a certificate of status.

Please forward the certificate of status to the undersigned.

Very truly yours,


ARCHIE J. RYAN III

AJR-III:lr
Encls.