

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 23, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P01000118703**

1. Entity Name  
**IN HOUSE COFFEE CORPORATION**



Principal Place of Business  
**700 E DANIA BEACH BLVD  
THIRD FLOOR  
DANIA BCH, FL 33004**

Mailing Address  
**700 E DANIA BEACH BLVD  
THIRD FLOOR  
DANIA BCH, FL 33004**



03032003 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**27-0017764**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**TAKIDIN, MUTAZ  
700 E DANIA BEACH BLVD  
THIRD FLOOR  
DANIA BCH, FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Mutaz Takidin DATE 06-18-04  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**DPST  
TAKIDIN, MUTAZ  
700 E DANIA BCH BLVD THIRD FL  
DANIA BCH, FL 33004**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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UN00000162807  
06/23/04-80001-013 550.00

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mutaz Takidin DATE 06-18-04 DAYTIME PHONE # 954-554-2769  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR