

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000018592	
1. Entity Name JAVA COMMUNICATIONS, INC.	

Principal Place of Business C/O 8307 NW 68 ST., STE 4929 MIAMI, FL 33166	Mailing Address C/O 8307 NW 68 ST., STE 4929 MIAMI, FL 33166
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DO NOT WRITE IN THIS SPACE



01282004 No Chg-P CR2E034 (10/03)

4. FEI Number 01-0634190	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent FERRELL GROUP CORPORATE SERVICES, LLC 201 S BISCAYNE BLVD., 34TH FLOOR MIAMI, FL 33131

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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 _____ Signature, typed or printed name of registered agent and title, if applicable	NOTE: Registered Agent signature required when reinstating	DATE _____
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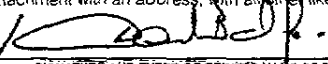
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D BELTRAN, DANIEL H C/O 8307 NW 68 ST., STE 4929 MIAMI, FL 33166
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04/19/04-80127-011 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 	Date: 04/12/04	Daytime Phone: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		