2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 23, 2007 08:00 A Secretary of State **DOCUMENT # P02000046113** 1. Entity Name COCONUTZ FUSSION CAFE, INC. Principal Place of Business Malling Address 2408 S STATE ROAD 7 2408 S STATE ROAD 7 MIRAMAR, FL 33023 MIRAMAR, FL 33023 CR2E034 (11/05) 04172007 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 01-0665886 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MASON, RALPH DO NOT WRITE 2408 S STATE ROAD 7 MIRAMAR, FL 33023 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS CEO TITLE MASON, RALPH NAME STREET ADDRESS 2408 S STATE ROAD 7 MIRAMAR, FL 33023 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS U000000721985 CITY-ST-ZIP 05/02/07-80012-021 150.0D TITLE NAME. STREET ADDRESS CITY-ST-7IP with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information of its 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 suppowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if s, with all other like emprowered. 12. I hereby certify that the information supplied indicated on this report or suppler of the corporation or the receiver, changed, or on an attachmen

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