2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000115390

Entity Name: SOL COFFEE, INC.

FILED Jan 17, 2003 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
5835 HAVERHILL RD. WEST PALM BEACH, FL 33407			4371 NORTH LAKE BLVD.	
			192 PALM BEACH GARDENS, FL 33410	
Current Mailing Address:		New Maili	New Mailing Address:	
4371 NORTH L	AKE BLVD			
#192 PALM BEACH (GARDENS, FL 33410			
FEI Number:	FEI Number Applied For (X)	FEI Number Not Appl	olicable () Certificate of Status Desired (X)	
Name and Add	ress of Current Registered Agent:	Name and	l Address of New Registered Agent:	
SOLIS, JULIAN 5835 HAVERHII WEST PALM BI	LL RD. EACH, FL 33407			
The above name in the State of F		purpose of changing i	its registered office or registered agent, or bot	
SIGNATURE:				
_	Electronic Signature of Registered Ag	ent	Date	
· -	n Financing Trust Fund Contribution (). D DIRECTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECT	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition SOLIS, JULIAN 5835 HAVERHILL RD WEST PALM BEACH, FL 33407	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	P () Change (X) Addition SOLIS, JULIAN 5835 HAVERHILL RD. WEST PALM BEACH, FL 33407	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition SOLIS, MARTHA 4509 ROAN LANE LAKE PARK, FL 33403	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	SEC () Change (X) Addition KUBIAK, KRISTOPHER 7859 SIENNA SPRINGS DR. LAKE WORTH, FL 33463	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIAN SOLIS P 01/17/2003