

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000019685

1. Entity Name
JAVALUTION COFFEE COMPANY



Principal Place of Business
**2485 E. SUNRISE BLVD.
SUITE 201A
FT. LAUDERDALE, FL 33304**

Mailing Address
**2485 E. SUNRISE BLVD.
SUITE 201A
FT. LAUDERDALE, FL 33304**



04202007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
73-1694004

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**LEGEL, LARRY
800 W. CYPRESS CREEK ROAD
#470
FORT LAUDERDALE, FL 33309**

**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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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
**SDC
SANZARI, ANTHONY
2100 N. OCEAN BLVD. #805
FORT LAUDERDALE, FL 33305**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PTD
PUMPER, SCOTT
2636 NE 15TH STREET
FORT LAUDERDALE, FL 33304**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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U00000745179
05/16/07-80018-010 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Anthony Sanzari **ANTHONY SANZARI SECY** 4.25.7 954 4938900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #