2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 10, 2005 08:00 AM **DOCUMENT # P03000061403** Secretary of State 1. Entity Name COLOMBIAN COFFEE INTERNATIONAL CORP. Principal Place of Business Mailing Address 9949 NW 89 AVE #8 Medley, Fl 33178 9949 NW 89 AVE #8 MEDLEY, FL 33178 No Chg-P CR2E034 (10/03) 01042005 DO NOT WRITE IN THIS SPACE Applied Far 4. FEI Number 55-0834717 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent SANUDO, ERIK E PD DO NOT WRITE 9949 NW 89 AVE #8 MEDLEY, FL 33178 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ПΠЕ SANUDO, ERIK E PD NAME STREET ADDRESS 9949 NW 89 AVE #8 100000176936 MEDLEY, FL 33178 CITY-ST-ZIP 01/11/05-80019-009 190.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP Samuel Samuel et septe de Samuel (Samuel Samuel TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CBY_ST-719 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this filling 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. 883 **SIGNATURE:**

SIGNATURE ARD TYPED UP PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED