

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90154 024 ***150.00

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1. Entity Name
JAVABUCKS, INC.



Principal Place of Business
3965 INVESTMENT LANE
WEST PALM BEACH, FL 33404

Mailing Address
3965 INVESTMENT LANE
WEST PALM BEACH, FL 33404

40060411



04182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0969168

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GRAVANTE, JOHN A
3965 INVESTMENT LANE
WEST PALM BEACH, FL 33404

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GRAVANTE, JOHN A
STREET ADDRESS	3965 INVESTMENT LANE
CITY-ST-ZIP	WEST PALM BEACH, FL 33404
TITLE	SD
NAME	KELLY, JOSEPH
STREET ADDRESS	3965 INVESTMENT LANE
CITY-ST-ZIP	WEST PALM BEACH, FL 33404
TITLE	VP
NAME	KREBS, JOHN E
STREET ADDRESS	3965 INVESTMENT LANE
CITY-ST-ZIP	WEST PALM BEACH, FL 33404
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

JK 4/20/06

**DO NOT WRITE
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 Joseph P. Kelly Joseph P. Kelly 4/20/06 561
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #