2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144743

Entity Name: COCOA BEACH COFFEE COMPANY

FILED Apr 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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2023 NORTH ATLANTIC AVE 211 COCOA BEACH, FL 32931

Current Mailing Address: New Mailing Address:

453 WEATHERSFIELD AVE 317 JACK DRIVE

ALTAMONTE SPRINGS, FL 32714 COCOA BEACH, FL 32931

FEI Number: 20-3687807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOORE, BRANDON
453 WEATHERSFIELD AVE.

MOORE, BRANDON
317 JACK DRIVE

ALTAMONTE SPRINGS, FL 32714 US COCOA BEACH, FL 32931 US

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.

SIGNATURE: BRANDON MOORE 04/18/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT () Delete Title: DP/S (X) Change () Addition Name: MOORE, MICHELLE S. Name: MOORE, MICHELLE

Address: 453 WEATHERSFIELD AVE. Address: 317 JACK DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: COCOA BEACH, FL 32931

Title: DP () Delete Title: DV/T (X) Change () Addition Name: POSADA, HERNANDO Name: MOORE, BRANDON

Name: POSADA, HERNANDO Name: MOORE, BRANDON
Address: 1445 S. ATLANTIC AVE. Address: 317 JACK DRIVE
City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: COCOA BEACH, FL 32931

Title: DS (X) Delete Title: () Change () Addition

 Name:
 PAULUS, JOSÉPH
 Name:

 Address:
 1445 S. ATLANTIC AVE.
 Address:

 City-St-Zip:
 COCOA BEACH, FL 32931
 City-St-Zip:

Title: DV (X) Delete Title: () Change () Addition

 Name:
 MOORE, BRANDON
 Name:

 Address:
 453 WEATHERSFIELD AVE.
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MICHELLE MOORE DP 04/18/2007