2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154017

Entity Name: ROBAK'S COFFEE CORP.

FILED Apr 24, 2007 Secretary of State

Entity Nai	me: ROBAK'S	COFFEE CORP.				
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
1905 US 2 SEBRING,	7 N. , FL 33870					
Current Mailing Address:			New Maili	New Mailing Address:		
2647 N CAMDEN RD AVON PARK, FL 33825				3198 N. BUCKINGHAM RD. AVON PARK, FL 33825		
FEI Number	: 51-0564398	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
ASHCRAFT, ALAN 246 W DAMON DR AVON PARK, FL 33825 US			246 W. DA	ASHCRAFT, ALAN 246 W. DAMON DR. AVON PARK, FL 33825 US		
	named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registered o	office or registered agent, or both,	
SIGNATU	RE:			04/24/2007		
Election Car		ic Signature of Registered Ag	ent		Date	
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGES	TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () ROGERS, BRU 3198 N BUCKIN AVON PARK, FI	IGHAM RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () BAKER, HEIDI 2647 N CAMDE AVON PARK, FI		Title: Name: Address: City-St-Zip:	ST (X ROGERS, JOY 3198 N. BUCK AVON PARK, F	INGHAM RD.	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D (DAVIDSON, EI 1404 QUEEN / SEBRING, FL	AVE.	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D (ASHCRAFT, M 246 W. DAMO AVON PARK, F	N DR.	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D (JOHNSON, TE 83 HILLCRES [*] AVON PARK, F	T DR.	

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: BRUCE ROGERS P 04/24/2007