## **FILED** May 31, 2007 8:00 am Secretary of State 05-04-2007 90071 019 \*\*\*150.00

DOCUMENT # P06000042370  1. Enitty Name COFFEE PARTNERS 1, INC.								07 90071 0		30.00
Principal Place of Business			Mailing Address			66017219				
60 SOUTH IVANHOE BLVD. Orlando, Fl. 32804			777 NW 72ND AVENUE 3A20			Ì		1002.		
			MIÁMI, FL 33126			1 108019181	E E ING ORIN GONE GONE G	IONI EERI ERIK MEER	1111 1 <b>4 4 6</b> 1 1111	itu a mm
2. Principal Place of Business - No P.O. Box #			3. Mailing Address			-  IIIIII				
Suite, Apt. #, etc.			Suite, Apt. #, etc.		04162007	Chg-P	CR2E034			
City & State		ļ	City & State		4. FEI Numb		1679	<del></del>	plied For t Applicable	
Zip	Country		Zip Coun		nuy		of Status Desired	Si Si	3.75 Add e Required	itional
6. Name and Address of Current R			gistered Agent	Nome	7. Name and Address of New Registered Agent					
ZACZAC, GEORGE JR					Name		<u>-                                 </u>			·
777 NW 72ND AVENUE 3A20				Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL 33126				l						
					City			FL	Zip Code	8
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, cycled or protect number of registered adent and title if applicable. (HOTF: Registered Agon's signature certained signature certaining) DATE										
FILI After Ma	E NOW!!! FEE IS \$1 by 1, 2007 Fee will	ncing \$!	5.00 May Be ided to Fees							
10.		ICERS AND D		11.		ADDITIONS	CHANGES TO O			
HAME	D ZACZAC, GEÓRGE .	☐ Delete	FITE NAME					_ Change	Addition	
STREET ADDRESS					EET ADDRESS					
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NAME	ARONSON, GARY		, Da Deleas	NA	AE .				J,-	
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12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental reports yide 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 employered 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 any address with all other like employered.										
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10.0.00	SIGNATURE: STANDARD AND THE PROPERTY WANT OF STANDING OFFICE OF CHECKED OF CHECKED AND THE PROPERTY OF CHECKED									