

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000067389

FILED
Jul 02, 2009
Secretary of State

Entity Name: COFFEE HOUSE FLICKS, INC.

Current Principal Place of Business:

5249 WELLINGTON PARK CIR. SUITE B37
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

5249 WELLINGTON PARK CIR. SUITE B37
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 41-2242254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRISHAUN, MARQUETTE
5249 WELLINGTON PARK CIR. SUITE B37
ORLANDO, FL 32839 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLLINS, JUSTIN
Address: 5170 CABANNE AVE
City-St-Zip: ST LOUIS, MO 63113

Title: D () Delete
Name: SALEH, SHADI
Address: 32 WALL RD SUITE 1
City-St-Zip: BOSTON, MA 02124

Title: D () Delete
Name: HALL, JARVIS
Address: 4707 SOUTH TEXAS AVE. UNIT B
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: WILSON, KEOVONNE
Address: 85 COLUMBIA ST SUITE 2C
City-St-Zip: NEW YORK, NY 10002

Title: CEO () Delete
Name: TRISHAUN, MARQUETTE
Address: 5249 WELLINGTON PARK CIR. SUITE B37
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MARQUETTE TRISHAUN

CEO

07/02/2009

Electronic Signature of Signing Officer or Director

_____ Date