

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra G. Monham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 12:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000045640 (7)**

1. Corporation Name

BEST COFFEE & BEVERAGE, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/17/1994

3a. Date of Last Report

Principal Place of Business

6065 N.W. 167TH STREET
SUITE D-8
MIAMI FL 33015

Mailing Address

6065 N.W. 167TH STREET
SUITE D-8
MIAMI FL 33015

2. Principal Place of Business

21 6095 N.W. 167 St

2a. Mailing Address

26 6095 N.W. 167 St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Ste D-8

27 Ste D-8

City & State

City & State

23 Miami, FL 33015

28 Miami, FL 33015

Zip Country

Zip Country

24 Dade

29 Dade

4. FEI Number

65-0498758

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

MC GEE, MICHAEL
15476 N.W. 77TH CT.
SUITE 431
MIAMI LAKES FL 33016

10. Name and Address of New Registered Agent

81 Name

Lorena Ricci

82 Street Address (P.O. Box Number is Not Acceptable)

6095 N.W. 167 Street

83

Ste D-8

84 City

Miami

FL

85 Zip Code

33015

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Sandra G. Monham

Secretary

5/22/95

Signature, typed or printed name of registered agent and Secretary

(NOTE: Registered Agent signature required when transferring)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
RICCI, JOSE W
6065 N.W. 167TH STREET
MIAMI FL 33015

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
GARCIA, ANGEL
6065 N.W. 167TH STREET
MIAMI FL 33015

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

D
Jose Ricci W
6095 N.W. 167 Street D-8
Miami, FL 33015

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

D
Angel Garcia
6095 N.W. 167 Street D-8
Miami, FL 33015

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☒ Change ☐ Addition

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REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sandra G. Monham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lorena Ricci (Secretary)

1/20/95

Date

(305) 828-8072

Business Phone #