

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000082765 (6)

1. Corporation Name

COFFEE GALLERY CAFE, INC.



Principal Place of Business

Mailing Address

517 LAKE AVE.
LAKE WORTH FL 33461

517 LAKE AVE.
LAKE WORTH FL 33460-3808

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24.

25.

29.

30.

3. Date Incorporated or Qualified

11/09/1994

3a. Date of Last Report

06/21/1996

4. FEI Number

65-0530241

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

10. Name and Address of New Registered Agent

KAMINSKY, RICHARD
517 LAKE AVE.
LAKE WORTH FL 33461

81. Name

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

83.

84. City

FL

85.

Zip Code

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

Signature of Registered Agent (if not the same as the corporation's name, it must be typed)

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ DELETE

D
KAMINSKY, RICHARD
517 LAKE AVE.
LAKE WORTH FL 33461

2. TITLE ☐ DELETE

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1. TITLE ☐ Change ☐ Addition

2. NAME ☐ Change ☐ Addition

3. STREET ADDRESS ☐ Change ☐ Addition

4. CITY-ST-ZIP ☐ Change ☐ Addition

5. CITY-ST-ZIP ☐ Change ☐ Addition

6. CITY-ST-ZIP ☐ Change ☐ Addition

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30. CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD

KAMINSKY

2/13/97

(561) 585-5911

0327808

CR2E034 (9/96)