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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000048871 (4)

VIENNA COFFEE HOUSE COMPANY

## **FILED** Feb 06 1998 8:00am Secretary of State



Suite, Apt. 4, etc.	Principa Place	of Business	Mailing Address			
2. Principal Place of Business   2a, Mailing Address   4. FEI Number   Applied For   Not Applicable   Suite, Apt. 4, etc.   28   Suite, Apt. 4, etc.   S	5724 S FLAMI	NGO BLVD	11031 NW 16TH STREET			
2. Principal Place of Business		FL 33330	PEMBROKE PINES FL 33026			
Principal Pface of Business   2a, Mailing Address   4. FEI Number   Applied For   St. Oscilla, Apt. 4, etc.   Suite, Apt. 4, etc.	บร					<u></u>
2. Principal Place of Business   2. Amaling Address   4. Eft Number   Applied For   58   58   50   50   50   50   50   50						
Suite, Apt. 4, etc.						
Suite, Apt. 6, etc.    Suite, Apt. 6, etc.	2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
City & State						65-0593879 Not Applicable
City & State	Suite, Apt. #	, etc.	Suite, Apt. #, etc.			
Zip	22		27			Fee Required
Zip   Country   Zip   Country   Zip   Country   Siph   Country   Siph   Country   Sight   Sight   Country   Sight   Country   Sight   Sight   Country   Sight   Sigh	City & State		City & State			6. Election Campaign Financing \$5.00 May Be
25   29   30   Personal Property Tax due June 30.   1	23		28			
9. Name and Address of Current Registered Agent  JACOBSEN, LINDA 11031 MV 16TH STREET PEMBROKE PINES FL 33026  24 City  Live Address (P.O. Box Number is Not Acceptable)  25 Street Address (P.O. Box Number is Not Acceptable)  26 Street Address (P.O. Box Number is Not Acceptable)  27 Street Address (P.O. Box Number is Not Acceptable)  28 City  FL  88 Zip Code  28 City  FL  88 Zip Code  28 City  FL  89 Zip Code  28 City  FL  80 Zip Code  40 City  FL  81 Zip Code  40 City  FL  81 Zip Code  40 Zip City  FL  82 Zip Code  40 Zip City  FL  83 Sineer Address  84 Zip City  FL  85 Zip Code  85 Zip Code  86 Zip City  FL  86 Zip Code  87 Zip City  87 Zip City  87 Zip City  88 Zip Code  88 Zip City  88 Zip City  88 Zip Code  89 Zip City  89 Zip City  89 Zip City  89 Zip City	Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the current year Intangible
JACOBSEN, LINDA 11031 NW 16TH STREET PEMBROKE PINES FL 33026  82 Street Address (P.O. Box Number is Not Acceptable)  83 Repeated agent, or both, in the State of Florida. Such change was authorized by the 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, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and many and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and the corporation's board of directors, I hereby accept the appointment as registered agent, or both in the financial statement for the purpose of changing its registered defined agent, and the corporation's board of directors, I hereby accept the appointment as registered agent, or both in the financial statement for the purpose of changing its registered agent, or both in the financial statement for the purpose of changing its registered agent, or both in the financial statement for the purpose of changing its registered agent, or both in the financial statement for the purpose of changing its registered agent, or both in the financial statement for the purpose of changing its registered agent, or both in the fin	24	25	29	30		Personal Property Tax due June 30. 🗹 Yes 🔲 No
110.31 NW 16TH STREET PEMBROKE PINES FL 33026  83  84 City FL Street Address (P.O. Box Number is Not Acceptable)  83  84 City FL Street Address (P.O. Box Number is Not Acceptable)  85  86 City FL Street Address (P.O. Box Number is Not Acceptable)  87  88  89  80  80  80  80  80  80  80  80		g. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
11031 NW 16TH STREET PEMBROKE PINES FL 33026  22 Street Address (P.O. Box Number is Not Acceptable)  33  34 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 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, or hoth, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or a differ appointment as 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, and this it applicable.  SIGNATURE    DP	JAC	OBSEN, LINDA		8	1 Nan	ame
PEMBROKE PINES FL 33026    Ba				-	0 0	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
B3   B4   City				82 Street Ad		reet Address (P.O. Box Number is Not Acceptable)
### City ### City ### City ### City #### City #### City ####################################	·	IDITOTIC TITLE TE GOODES		18	13	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607.0508, Florida Statules.  SIGNATURE  Signature. Speed or privide name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DP					<u> </u>	
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 author/zed by the corporation's board of directors. I hereby accept the appointment as registered agent and talle it supplicable.  SIGNATURE    Signature, hyped or preted name of registered agent and talle it applicable. (NOTE Registered Agent signature required when reinstatics)   DATE				1	4 City	ity 85 Zip Code
SIGNATURE   Signature, hyped or printed name of registered agent and title if applicable.   (NOTE Registered Agent stignishture required when reinstating)   DATE						
SIGNATURE   Signature, hyped or printed name of registered agent and title if applicable.   (NOTE Registered Agent stignishture required when reinstating)   DATE	11. Pursuant to	the provisions of Sections 607.0502 distered agent, or both, in the State (	t and 607.1508, Florida Stati of Florida. Such change was	ites, the abo authorized	ove-nam by the o	med corporation submits this statement for the purpose of changing its registered
Signature, typed or preted name of registered agent and title if applicables, (NOTE Registered Agent signature required when retretating)   DATE	agent. I am	familiar with, and accept the obliga	tions of, Section 607.0505, F	lorida Statu	les.	
Signature, typed or preted name of registered agent and title if applicables, (NOTE Registered Agent signature required when retretating)   DATE	SIGNATURE					.,
TITLE	Si				gent signa	
NAME						
11031 NW 16TH STREET   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP	TITLE	- · · · · · · · · · · · · · · · · · · ·	L DELETE	1.1 TIYL	ŧ	☐ Change ☐ Addition
DELETE   D	NAME			1.2 NAM	E	}
DELETE   DST	STREET ADDRESS			1.3 STRI	ET ADDRES	RESS
NAME   JACOBSEN, PER   11031 NW 16TH STREET   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP   PEMBROKE PINES FL   2.4 CITY-ST-ZIP	CITY-ST-ZIP	PEMBROKE PINES FL		1.4 C!TY	- ST- ZIP	,
STREET ADDRESS	TITLE	DST	DELETE	2.1 TITU		Change Addition
CITY-ST-ZIP   PEMBROKE PINES FL   2. 4 CITY-ST-ZIP     Change   Addition	NAME	Jacobsen, Per		2.2 NAM	E	
CITY-ST-ZIP   PEMBROKE PINES FL   2.4 CITY-ST-ZIP     Change   Addition	STREET ADDRESS	11031 NW 16TH STREET		2.3 STREE		RESS
DELETE   3.1 TITLE		DEMPROVE DINEC EL				i
NAME			I DELETE			
STREET ADDRESS   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP     Change   Addition	1			1		
3.4. CITY-ST-ZIP					-	DECC.
TITLE         DELETE         4.1 TITLE         Change         Addition           NAME         4.2 NAME         *** </td <td></td> <td></td> <td></td> <td></td> <td></td> <td>1</td>						1
NAME			T ndi cre			
STREET ADDRESS   4.3 STREET ADDRESS	1		☐ Netele	1		
CITY-ST-ZIP         4.4 CITY-ST-ZIP           ITILE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME				1		
TITLE	STREET ADDRESS			4.3 STR	ET ADDRES	IESS
NAME 5.2 NAME	CITY-ST-ZIP					
	TITLE		LT DELETE	5.1 TITL		☐ Change ☐ Addition }
STORET ANDRESS	NAME			5.2 NAM	E	
autres abouted 1	STREET ADDRESS			5.3 STRE	ET ADDRES	RESS
CITY-ST-2IP 5.4 CITY-ST-2IP	CITY-ST-ZIP			5.4 CITY	-ST-ZIP	
TITLE DELETE 6.1 TITLE Change Addition			DELETE			
NAME 6.2 NAME	1			6.2 NAM	E	
STREET ADDRESS 6.3 STREET ADDRESS	i i			1		RESS .
CMY-ST-ZIP . 6.4 CITY-ST-ZIP						1
14. Thereby 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	14. I hereby ce	rtify that the Information supplied wit	h this filing does not qualify			

SIGNATURE: