.2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 06, 2006 8:00 am Secretary of State DOCUMENT # P96000038574 1. Entity Name 03-06-2006 90005 049 ***150.00 HOT COCOA OF BREVARD, INC. Principal Place of Business Mailing Address 1015 FLOTILLA CLUB DRIVE INDIAN HARBOR BEACH FL 32937 1015 FLOTILLA CLUB DRIVE INDIAN HARBOR BEACH FL 32937 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MORIN, ILETA J Street Address (P.O. Box Number is Not Acceptable) 1015 FLOTILLA CLUB DRIVE INDIAN HARBOUR BEACH FL 32937 Zip Code 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, typed or printed name of registered agent and tale if applicable, (NOTE: Remistaged Agent signature required when rejustation) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust'Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Change ☐ Defete ☐ Addition JOSEPHS, JUDY NAME STREET ADDRESS 370 LAKEVIEW LANE CITY-ST-ZIP PALM BAY FL 32909 CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition TOOMEY, HAZEL HAME NAME STREET ADDRESS 1515 SYKES CREEK STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP MERRITT ISLAND FL 32953 THE Delete TITLE ☐ Change ☐ Addition NAME MORIN, JOYCE NAME STREET ADDRESS STREET ADDRESS 1015 FLOTILLA CLUB DR CITY-ST-ZIP CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937 TITLE ☐ Delete TITLE Change Addition HOROWITZ, JERRY STREET ADDRESS 240 MALAGA COURT STREET ADDRESS MERRITT ISLAND FL 32953 CITY-ST-7IP CITY-ST-ZIP TITLE □ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Addition TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

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SIGNATURE: G OFFICER OR DIRECTOR

if changed, or on an attachment with an address, with all other like empowered.

12. I hereby certify that the information supplied with this fiting does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11