

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

FILED
May 12 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 # P96000094954 (0)

1. Corporation Name
ISLAND COFFEE, INC.

Principal Place of Business

225 KING ST
COCOA FL 32922

Mailing Address

225 KING ST
COCOA FL 32922-7839



2. Principal Place of Business

21 225 King St.

2a. Mailing Address

26 225 King St.

3. Date Incorporated or Qualified
11/18/1996

3a. Date of Last Report

4. FEI Number
59-3418161

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

City & State

23 Cocoa

City & State

28 Florida

Zip

24 32922

Country

25 Brevard

Zip

29 32922

Country

30 USA

9. Name and Address of Current Registered Agent

LEVY, BRUCE E
580 PARK AVE
MERRITT ISLAND FL 32953

10. Name and Address of New Registered Agent

81 Name KAREN J. LEVY Karen J. Levy
82 Street Address (P.O. Box Number is Not Acceptable) 580 Park Ave
83 Merritt Isl. Merritt Island,
84 FL 32953

1. 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 KAREN J. LEVY

Karen J. Levy

March 19, 1997

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	NAME	LEVY, BRUCE E	STREET ADDRESS	580 PARK AVE	CITY-ST-ZIP	MERRITT ISLAND FL 32953	<input checked="" type="checkbox"/> DELETE
TITLE	DPST	NAME	LEVY, SAMUEL E	STREET ADDRESS	225 KING ST	CITY-ST-ZIP	COCOA FL 32922	<input checked="" type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DPST	1.2 NAME	KAREN J. LEVY	1.3 STREET ADDRESS	580 Park Ave	1.4 CITY-ST-ZIP	Merritt Island, FL 32953	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE		2.2 NAME		2.3 STREET ADDRESS		2.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE		3.2 NAME		3.3 STREET ADDRESS		3.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		4.2 NAME		4.3 STREET ADDRESS		4.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE		5.2 NAME		5.3 STREET ADDRESS		5.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE		6.2 NAME		6.3 STREET ADDRESS		6.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 if changed, or on an attachment with an address.

SIGNATURE:

Karen J. Levy 3-19-97 (407) 632-1005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0102014

CR2E034 (9/96)