

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000033183

FILED
Apr 05, 2004
Secretary of State

Entity Name: COFFEE GIRL, INC.

Current Principal Place of Business:

590 ROYAL PALM BEACH BLVD
ROYAL PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

590 ROYAL PALM BEACH BLVD
STE. C
ROYAL PALM BEACH, FL 33411 US

New Mailing Address:

FEI Number: 65-0748583 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMPERT, JEFFREY B ESQ.
590 ROYAL PALM BEACH BLVD
ROYAL PALM BEACH, FL 33411

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PARSONS, LISA
Address: 590 ROYAL PALM BEACH BLVD
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P () Change (X) Addition
Name: PARSONS, LISA
Address: 590 ROYAL PALM BEACH BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: PV () Change (X) Addition
Name: PARSONS, LISA
Address: 590 ROYAL PALM BEACH BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: S/T () Change (X) Addition
Name: PARSONS, LISA
Address: 590 ROYAL PALM BEACH BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA PARSONS

P

04/05/2004

Electronic Signature of Signing Officer or Director

_____ Date