2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 26, 2000 8:00 am Secretary of State DOCUMENT # P98000098997 1. Entity Name COFFEE WORLD USA, INC. 02-26-2000 90033 027 ***150.00 Principal Place of Business Mailing Address 3708 LASSON COURT 3708 LASSON COURTS ORLANDO FL 32835-2669 ORLANDO FL 32835 UUU24474-2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-3543881 Not Applicable Zip Country . Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DIMOV, EVAN Street Address (P.O. Box Number is Not Acceptable) 3708 LASSON COURT ORLANDO FL 32835 City Zip Code FI 8. The above named ef for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS PSTD ☐ Addition ☐ Delete ☐ Change TITLE TITLE DIMOV, EVANDRO NAME NAME STREET ADDRESS 3708 LESSON COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32835 Addition ☐ Delete ☐ Change TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IE TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7)P ☐ Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP upplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information tal report is frue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director juster employees to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if a statute of the same appears in Block 12 if a statute of the same appears in Block 12 if a statute of the same appears in Block 12 if a statute of the same appears in Block 12 if a statute of the same appears in Block 12 if a statute of the same appears in Block 12 if a statute of the same appears in Bl 13. I hereby certify that the infinitely indicated on this report or

of the corporation or the changed, or on an attach

SIGNATURE:

Daytime Phone #