

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000034105

1. Entity Name
JAVA JOES ENTERPRISES, INC.

Principal Place of Business
7000 WEST PALMETTO PARK ROAD SUITE 400
BOCA RATON FL 33433

Mailing Address
7000 WEST PALMETTO PARK ROAD SUITE 400
BOCA RATON FL 33433

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number 65-0912647

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARELLEK, STEVEN
7000 WEST PALMETTO PARK ROAD SUITE 400
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Steven Garellek
700 S. Federal Hwy., Suite 200
Boca Raton, FL 33432

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.

SIGNATURE _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME
P KIRIAKOPOULOS, COSTA
STREET ADDRESS
11682 U.S HWY 1
CITY-ST-ZIP
NORTH PALM BEACH FL 33408

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED COSTA KIRIAKOPOULOS SEPT 8/01 416.232.0992

FILED
Sep 18, 2001 8:00 am
Secretary of State

09-18-2001 90081 020 ***550.00



DO NOT WRITE IN THIS SPACE

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