

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am  
Secretary of State

05-02-2001 90082 014 \*\*\*150.00

DOCUMENT # P99000095545

1. Entity Name

TOP COFFEE EXPRESS INC.

Principal Place of Business

1171 PALM AVENUE  
HIALEAH FL 33010

Mailing Address

1171 PALM AVENUE  
HIALEAH FL 33010

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0957713

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GARCIA, LUIS H  
1171 PALM AVENUE  
HIALEAH FL 33010

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME GARCIA, LUIS H  
STREET ADDRESS 5524 N.W. 114TH AVE APT 302  
CITY-ST-ZIP MIAMI FL 33178 ☐ Delete

TITLE P  
NAME Garcia, Luis H.  
STREET ADDRESS 5770 S.W. 156 Court  
CITY-ST-ZIP Miami Florida 33193 ☒ Change ☐ Addition

TITLE D  
NAME AMAYA, CARLOS  
STREET ADDRESS 3010 N.COURSE DRIVE  
CITY-ST-ZIP POMPANO BEACH FL 33069 ☐ Delete

TITLE S  
NAME Patricia Garcia  
STREET ADDRESS 5770 S.W. 156 Court  
CITY-ST-ZIP Miami Florida 33193 ☒ Change ☐ Addition

TITLE D  
NAME GARCIA, LUIS H  
STREET ADDRESS 5524 NW 114TH AVENUE APT 302  
CITY-ST-ZIP MIAMI FL 33178 ☐ Delete

TITLE D  
NAME Garcia Luis H.  
STREET ADDRESS 5770 S.W. 156 Court  
CITY-ST-ZIP Miami Florida 33193 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Luis H. Garcia

04/24/01

Date

305 7523864

Daytime Phone #

CR2E034 (10/00)