

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P-99000107477

1. Entity Name

Old School Coffee Company

FILED
Jul 12, 2000 8:00 am
Secretary of State

07-12-2000 90006 012 ***150.00

Principal Place of Business

Mailing Address

2900 W. Sample Rd.
Pompano Beach, FL 33073

777 South State Road 7
Margate, FL 33068

00067673

Principal Place of Business

2900 W. Sample Rd.
Suite, Apt. #, etc.

3. Mailing Address

777 South State Road 7
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Pompano Beach, FL

City & State

Margate, FL

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip 33073 Country Broward

Zip 33068 Country Broward

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Filings, Inc.
3732 N.W. 16th St.
Ft. Lauderdale, FL 33311-4132

7. Name and Address of New Registered Agent

Name Max Leuchter

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

777 South State Road 7

City Margate

FL Zip Code 33068

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 Max Leuchter

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, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

<p>Pres./Director Max Leuchter 777 S. St. Rd. 7 Margate, FL 33068</p> <p><input type="checkbox"/> Delete</p>	<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
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CR2E034 (9/99)

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: Max Leuchter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/2000

Date

954-969-2447

Daytime Phone #

6-28-2000

To whom it may concern,

I did not receive the original
notice for filing this report. Would
it be possible to have the late fee
waived. I have enclosed the report
and \$150.

Thank you for your consideration.

May Leunig