

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 674774

**FILED  
Jan 20, 2006  
Secretary of State**

**Entity Name:** ABC DISPENSING TECHNOLOGIES, INC.\*\*\*\*\*

**Current Principal Place of Business:**

9101 W. SAHARA AVE.  
#105-250  
LAS VEGAS, NV 89117 US

**New Principal Place of Business:**

7345 S DURANGO  
B1007-242  
LAS VEGAS, NV 89148 US

**Current Mailing Address:**

9101 W. SAHARA AVE.  
#105-250  
LAS VEGAS, NV 89117 US

**New Mailing Address:**

7345 S DURANGO  
B107-242  
LAS VEGAS, NV 89148 US

**FEI Number:** 59-2001203      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SULLIVAN, MICHAEL  
430 S.E. 3RD PLACE  
DEERFIELD BEACH, FL 33441 US

**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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SULLIVAN, DENISE  
Address: 9050 W. WARM SPRINGS, #1136  
City-St-Zip: LAS VEGAS, NV 89148

Title: VD ( ) Delete  
Name: ARCARO, JOSEPH A  
Address: 1901 W. SAHARA AVE. STE. #105-250  
City-St-Zip: LAS VEGAS, NV 89117

Title: SD ( ) Delete  
Name: LANGRILL, CHARLES  
Address: 1901 W. SAHARA AVE. STE.#105-250  
City-St-Zip: LAS VEGAS, NV 89117

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: HAYS, LEN  
Address: 9050 W WARM SPRINGS #1136  
City-St-Zip: LAS VEGAS, NV 89148

Title: SD (X) Change ( ) Addition  
Name: HASKIN, TIM  
Address: 924 DE MET  
City-St-Zip: LAS VEGAS, NV 89119

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: TIM HASKIN

SD

01/20/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date