2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)							Apr 18, 2003 8:00 am					
DOCUMENT # G83174 1. Entity Name PERRINE VENDING, INC.							Secretary of State 04-18-2003 90458 049 ***150.00					
Principal Place of Business % RICHARD F. BREDER. JR. 7850 S.W. 69TH AVE. MIAMI FL 33143			% RI 7850	ng Address CHARD F. BREDER, JR S.W. 69TH AVE. II FL 33143	.							
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State				/ & State		<u> </u>	4. FEI Number 59-2377695 Applied For Not Applicable					
Zip	p Country		Zip	Zip		Country		tificate of Status Desired [8.75 Add	litional	
6. Name and Address of Current Registered Agent								ne and Address of New Regis	tered Ag	ent		
BREDER, RICHARD F., JR. 7850 S.W. 69TH AVE. MIAMI FL 33143						<u> </u>	ddress (P.O. Box Number is Not Acceptable)					
MIAMI FL 33143						FL Zip Code			9			
8. The above the obligat	named entity ions of registe	submits this statement fered agent.	or the purp	pose of changing its re	egistered offi	ce or register	ed agent,	or both, in the State of Florida.	I am fam	niliar with, a	and accept	
SIGNATURE .	Signature, typed	or printed name of registered agen	t and title if app	plicable. (NOTE: I	Registered Agent	signature required	when reinsta	ting)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Financi Trust Fund Contribution.	ng 🔲		0 May Be to Fees	
10.		OFFICERS AND	DIRECTO	ORS	11.		ADDIT	IONS/CHANGES TO OFFICER	S AND D	IRECTORS	S IN 11	
NAME	PST BREDER, F 7850 S.W. MIAMI FL	RICHARD F., JR. 69TH AVE.		☐ Delete	TITLE NAME STREET ADDR				Ĺ	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREDER, F 7850 S.W. MIAMI FL	RICHARD F., JR. 69TH AVE.		☐ Delete	TITLE NAME STREET ADDF	IESS				Change	Addition	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: (?

STREET ADDRESS

CITY-ST-ZIP

SEQUITERHARD BREEZE TO