FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Sccretary of State DIVISION OF CORPORATIONS 1996 (2)**DOCUMENT #** SERVICE VENDING OF TALLAHASSEE,INC. Mailing Address Principal Place of Business 4864 MARKET PLACE 4684 MARKET PLACE TALLAHASSEE FL 32303 TALLAHASSEE FL 32303 3. Date Incorporated or Qualified 3a. Date of Last Report 06/20/1995 06/14/1974 4. FEI Number 2a. Mailing Address 26 R+ 3 Applied For 2. Principal Place of Business 59-1534480 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 6. Election Campaign Financing City & State 8 State \$5.00 May Be Trust Fund Contribution Added to Fees -10 CIDA 8. This corporation has liability for intangible tax under s. 199.032 Zio Yes No Florida Statutes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BEASLEY, DEBORA 82 4864 MARKET-PL 13 M 358 83 TALLAHASSEE: FL 82303~ 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above named corporation submits this statement for the purpose of changing its registered affice or registered agent or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE Signature itypical exponential consecution y throughout and the illustration th Mit. Registered Agent signature teq ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. CR2E034 (12/ DELETE 1 1 1014 TITLE BEASLEY, DARIAN C. 1.2 NAME NAME Rt 3 By 358 HAVANA, FI 32333 4864 MARKET PL 1.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 1.4 CUTY - ST - ZIP CHY-ST-ZIP Change DELETE Addition 2 1 THUE TITLE BEASLEY, DEBORA 2.2 NAME NAME RH 3 BW 358 4864 MARKEY PL 2.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL HAVANA , FI 32333 2.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 3 11/116 Change Addition TIFLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CIBY - S* - ZIP Change Add tion DELETE 4 1 liluf TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY ST ZIP DELETE Addition TITLE 5 1 TILLE 5.2 NAME

14. I do hereby certify that the information supplied with this fling is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early, 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

5.3 STREET ADDRESS

6.3 STREE! ADDRESS

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SIGNATURE

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DELFIE

Deboea Beasley

6/0/96 904-562-8363

Change

Addition