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DIVISION OF CORPORATIONS

**C T CORPORATION SYSTEM**  
**Requestor's Name**  
 660 East Jefferson Street  
**Address**  
 Tallahassee, Florida 32301  
**City State Zip Phone**  
 904-222-1092  
**CORPORATION(S) NAME**

500001511835  
 -06/13/95--01058--010  
 \*\*\*\*\*78.75 \*\*\*\*\*78.75

*Fifth Avenue Vending Systems, Inc.*

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| <input checked="" type="checkbox"/> Profit         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger              |
| <input type="checkbox"/> NonProfit                 | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other               |
| <input checked="" type="checkbox"/> Foreign        | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of R.A.      |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fictitious Name     |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Call When Ready        | <input checked="" type="checkbox"/> CUS/ G/S |
| <input type="checkbox"/> Certified Copy            | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30          |
| <input type="checkbox"/> Walk In                   | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up  |
| <input type="checkbox"/> Mail Out                  |   |  |

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## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE  
STATE OF FLORIDA:

1. FIFTH AVENUE VENDING SYSTEMS, INC.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. New York  
(State or country under the law of which it is incorporated)
3. 13-3836061  
(FEI number, if applicable)
4. May 31, 1995  
(Date of incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.156, F.S.))
7. c/o J.D. Gilbert & Co., CPA's, 600 W. Hillsboro Blvd., Ste. 510,  
Deerfield Beach, Florida 33441  
(Current mailing address)
8. To engage in any and all Lawful Acts or Activities permitted by Law.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:  
Name: C T Corporation System  
Office Address: c/o C T Corporation System, 1200 South Pine  
Plantation, Florida, 33324  
(Zip Code)
10. Registered agent acceptance:  
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.  
C T Corporation System  
Jonnie Bryan  
(Registered agent's signature) (Officer)  
JONNIE BRYAN  
SPECIAL ASSISTANT SECRETARY  
(Type Name and Title of Officer)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A DIRECTORS

Chairman: Antonio Florio

Address: 7101 NW 84 St.

TAMPA, Florida 33319

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: Antonio Florio

Address: 7101 NW 84 St.

TAMPA, Florida 33319

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

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**State of New York** | ss:  
**Department of State**

I hereby certify, that the certificate of incorporation of FIFTH AVENUE VENDING SYSTEMS, INC. was filed on 05/31/1995, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

\*\*\*

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 08th day of June  
one thousand nine hundred and  
ninety-five.



199506090033

*Alexander F. Treadwell*

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