manufacture and the second of the second FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** Feb 18, 1999 8:00am FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Katherine Harris **Secretary of State** ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1999 02-18-1999 90015 011 ***150.00 DOCUMENT # **K23406** 1. Corporation Name FLORIDA VENDING, INC. Mailing Address Principal Place of Business 5293 NW 161TH ST 5293 NW 161ST ST DO NOT WRITE INTHIS SPACE HIALEAH FL 3305 HIALEAH FL 33014 US US Date Incorporated or Qualifed / 05/12/1988 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business .65-0060471 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation wes the current year Intangible Country Zip Country Zip - 🗆 No Personal Property Tax. 30 25 10. Name and Addless of New Registered Agent 24 9. Name and Address of Current Registered Agent BEHAR, ARTHUR Street Address (P.O. Box Number is Not Acceptable) 82 3900 ISLAND BLVD. **APT. B-204** 83 **MIAMI FL 33160** 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office 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. (NOTE Registered Agent signature requ ature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. ☐ Addition ☐ DELETE 1.1 TITLE BEHAR, ARTHUR 1.2 NAME NAME 3900 ISLAND BLVD #204 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change □ DELETE 2.1 TITLE TITLE BEHAR, GREGG 2.2 NAME NAME 18172 S.W. 3RD ST. 2.3 STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 2.4 CITY-ST-CITY-ST-ZIP Change ☐ Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE πιE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS 4,4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change □ DELETE 5.1 TITLE TITLE

6.4 CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 repetiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 of chapter 607, Florida Statutes. CITY-ST-ZIF chment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

ATTICE GROUND OFFICER OF DIRECTOR

Change

☐ Addition