

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000002621

Entity Name: BOB'S VENDING, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

14167 SW 139TH COURT  
MIAMI, FL 33186

## New Principal Place of Business:

1461 SW 159 AVENUE  
PEMBROKE PINES, FL 33027

## Current Mailing Address:

14167 SW 139TH COURT  
MIAMI, FL 33186

## New Mailing Address:

1461 SW 159 AVENUE  
PEMBROKE PINES, FL 33027

FEI Number: 65-0971677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORMAN, TERRY J  
1521 SW LEJEUNE ROAD  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SCHMIDT, PAUL  
Address: 14167 SW 139TH COURT  
City-St-Zip: MIAMI, FL 33186

Title: S ( ) Delete  
Name: SCHMIDT, MARGARET  
Address: 14167 SW 139TH COURT  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SCHMIDT, PAUL  
Address: 1461 SW 159 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: S (X) Change ( ) Addition  
Name: SCHMIDT, MARGARET  
Address: 1461 SW 159 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33027

I hereby certify that the information supplied with this filing does not qualify 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: PAUL SCHMIDT

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date