

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 11, 2002 8:00 am
Secretary of State

06-11-2002 90152 006 ***150.00

DOCUMENT # P 01000011736

1. Entity Name

DNA Vending Corporation ✓

Principal Place of Business

Mailing Address

209 SW 46th St 209 SW 46th St
 Cape Coral, FL 33914 Cape Coral, FL 33914

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1075193

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Allen, Dale E
 209 SW 46th St
 Cape Coral, FL 33914

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME DP
 STREET ADDRESS Allen, Nicholas A
 CITY-ST-ZIP 209 SW 46th St
 Cape Coral, FL 33914

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME DTV
 STREET ADDRESS Allen, Dale E
 CITY-ST-ZIP 209 SW 46th St
 Cape Coral, FL 33914

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

X [Signature] (Prg)
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-6-02

Date

941-565-1936

Daytime Phone #

CR2E034 (11/00)

Nicholas A Allen
209 SW 46th St
Cape Coral, Fl 33914

Attachment
Document #
PO 1000011736
117645

May 30, 2002

Division of Corporations
P O Box 1500
Tallahassee, Fl 32302-1500

RE: Uniform Business Report

To Whom It May Concern:

Please accept this handwritten copy of my Uniform Business Report for the year 2002, with a check in the amount of \$150.00. This being my first year in business I was waiting on the computer printout from your agency to file, which at this time I don't have. I am asking you to override the penalty of \$400.00 this time, due to the above circumstances. Please check your records to make sure you have my correct address.

I appreciate any help you can give me.

Thank you.

Nicholas Allen
DP