## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000042248

**Entity Name: QUALITY VENDING CORPORATION** 

FILED Jan 20, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18981 NORTH MIAMI AVE APT #109 911 HILLCREST CT

MIAMI, FL 33169 SUITE 124

HOLLYWOOD, FL 33021 US

Current Mailing Address: New Mailing Address:

18981 NORTH MIAMI AVE APT #109 911 HILLCREST CT

MIAMI, FL 33169 SUITE 124

HOLLYWOOD, FL 33021 US

FEI Number: 65-1098975 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUCK, LANCE L

18981 NORTH MIAMI AVE APT #109

LUCK, LANCE L

911 HILLCREST CT

MIAMI, FL 33169 US SUITE 124 HOLLYWOOD, FL 33021 US

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: LANCE LUCK 01/20/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name: LUCK, LANCE L Name: LUCK, LANCE L

 Address:
 18981 NORTH MIAMI AVE APT #109
 Address:
 911 HILLCREST CT STE 124

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:
 HOLLYWOOD, FL 33021 US

Title: P ( ) Delete Title: VP (X) Change ( ) Addition

Name: LNCK, LANCE L Name: LUCK, JESSICA C

 Address:
 18981 N. MIAMI AVE #109
 Address:
 911 HILLCREST CT STE 124

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:
 HOLLYWOOD, FL 33021 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LANCE L LUCK PD 01/20/2003