

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90171 010 ***150.00

DOCUMENT # *P01000042576*
1. Entity Name
ABCE VENDING MACHINES



DO NOT WRITE IN THIS SPACE

11009641

2. Principal Place of Business
357 E HIALEAH DR
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 126874
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
HIALEAH, FL

City & State
HIALEAH, FL

4. FEI Number
65-1106370

Applied For
Not Applicable

Zip
33012

Country
USA

Zip
33012

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ENRIQUE PEREZ
Street Address (P.O. Box Number is Not Acceptable)
357 E. HIALEAH DRIVE
City *HIALEAH* FL Zip Code *33012*

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE <i>PRESIDENT</i>	NAME <i>ENRIQUE PEREZ</i>	STREET ADDRESS <i>357 E. HIALEAH DRIVE</i>	CITY-ST-ZIP <i>HIALEAH, FL 33012</i>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
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**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Enrique Perez* ENRIQUE PEREZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/03 305-331-1651
Date Deadline Filing #

CR2E034B (12/02)