

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000045750

FILED
Apr 28, 2008
Secretary of State

Entity Name: CUSTOM VENDING SOLUTIONS, INC.

Current Principal Place of Business:

260 SCARLET BOULEVARD
OLDSMAR, FL 34677

New Principal Place of Business:

1640 N. HERCULES AVE.
SUITE H
CLEARWATER, FL 33765

Current Mailing Address:

260 SCARLET BOULEVARD
OLDSMAR, FL 34677

New Mailing Address:

1640 N. HERCULES AVE.
SUITE H
CLEARWATER, FL 33765

FEI Number: 59-5716602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

P&P COMPANIES, INC.
5128 PERENNIAL DR.
HOLIDAY, FL 34690 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: PSD () Delete
Name: GARZON VEGA, LUIS M
Address: 260 SCARLET BOULEVARD
City-St-Zip: OLDSMAR, FL 34677

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC () Change (X) Addition
Name: OROSZ, BOB D
Address: 5306 FRONTIER DR.
City-St-Zip: ZEPHYRHILLS, FL 33540

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: LUIS M. GARZON

PSD

04/28/2008

Electronic Signature of Signing Officer or Director

Date