

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2002 8:00 am
Secretary of State

09-03-2002 90167 025 ***150.00

DOCUMENT # P01000076964

1. Entity Name

RENEE'S VENDING, INC.

Principal Place of Business

**7513 RAMPART RD
JACKSONVILLE FL 32244**

Mailing Address

**7513 RAMPART RD
JACKSONVILLE FL 32244**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-37300003

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

BYRD, RENEE**7513 RAMPART RD****JACKSONVILLE FL 32244**

7. Name and Address of New Registered Agent

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
D	BYRD, RENEE	7513 RAMPART RD	JACKSONVILLE FL 32244	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

CR2E034 (4/02)

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:

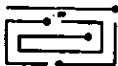
RENEE BYRD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-26-02 904-633-8084



Attachment
CONNER, HUBBARD & COMPANY, P.A.
Certified Public Accountants

9952/1

Taxation, Accounting, Pension Planning, and Business Counseling

August 20, 2002

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Renee's Vending, Inc.
DOCUMENT # P01000076964

To Whom It May Concern:

On behalf of the above corporation, I have attached a copy of the original 2002 Uniform Business Report and a check for the original filing fee in the amount of \$150.00

We respectfully request that you abate all penalties assessed based on the following:

1. Renee Byrd, the sole officer and stockholder, is legally blind and participates in the Florida Division of Blind Services, Vending Sales Program.
2. She has made a good faith effort to comply with all State of Florida business rules and taxes.
3. The corporation was formed on August 1, 2001 and Mrs. Byrd was not aware that she was required to file an annual report.

Thank you for your assistance in resolving this matter. If I can be of any further help, please do not hesitate to telephone.

Sincerely,
CONNER, HUBBARD & COMPANY, P.A.

Kim K. Hubbard
Kim K. Hubbard,
Certified public Accountant

cc: Renee Byrd

Website: www.ConnerHubbard.com

Please respond to the office at:

E-mail: Firm@ConnerHubbard.com

☐ 1106 Park Avenue
Orange Park, Florida 32073
(904) 278-1040; Fax (904) 278-9444

☒ 3128 Beach Boulevard
Jacksonville, Florida 32207
(904) 398-1710; Fax (904) 398-5298

☐ 212 North Davis Street
Nashville, Georgia 31639
(229) 686-3377; Fax (229) 686-3586