

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2003 8:00 am
Secretary of State

01-21-2003 90184 029 ***150.00

DOCUMENT # P02000079293

1. Entity Name
ACCESS JMC VENDING, INC.



Principal Place of Business
**37 WEST SMITH STREET
WINTER GARDEN FL 34787**

Mailing Address
**POST OFFICE BOX 450
GOTHA FL 34734**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

30-0098839

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HAAQ, RONALD G
37 WEST SMITH STREET
WINTER GARDEN FL 34778-7**

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]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Officer** ☐ Delete
NAME **Debra Cito**
STREET ADDRESS **37 West Smith St**
CITY-ST-ZIP **Winter Garden, FL 34778**

TITLE **President** ☐ Change ☐ Addition
NAME **Debra Cito**
STREET ADDRESS **37 W. Smith St**
CITY-ST-ZIP **Winter Garden, FL 34778-7**

TITLE **Vice President** ☐ Delete
NAME **Gregoria Haag**
STREET ADDRESS **37 W. Smith St**
CITY-ST-ZIP **Winter Garden FL 34778**

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

TITLE **Treasurer** ☐ Delete
NAME **Joseph Cito**
STREET ADDRESS **37 W. Smith St.**
CITY-ST-ZIP **Winter Garden, FL 34778**

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

TITLE **Secretary** ☐ Delete
NAME **Ronald Haag**
STREET ADDRESS **37 W. Smith St**
CITY-ST-ZIP **Winter Garden, FL 34778**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-03
Date Daytime Phone #

CR2034 (10/02)