

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90748 014 ***150.00

DOCUMENT # P02000098489

1. Entity Name
PENS VENDING, INC.



Principal Place of Business
**2330 ROOSEVELT ST
HOLLYWOOD FL 33020**

Mailing Address
**2330 ROOSEVELT ST
HOLLYWOOD FL 33020**

2. Principal Place of Business
1400 W JORDAN ST.
Suite, Apt. #, etc.

3. Mailing Address
3251 DEER Ridge Rd.
Suite, Apt. #, etc.

City & State
Pensacola, FL

City & State
Cantonment, FL

4. FEI Number
54-2073156

Applied For
Not Applicable

Zip
32501

Country

Zip
32533

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MELLOTT, LOURENA C
2330 ROOSEVELT ST
HOLLYWOOD FL 33020**

Name
Mellott, Lourena
Street Address (P.O. Box Number is Not Acceptable)
3251 Deer Ridge Rd.

City
Cantonment **FL** Zip Code
32533

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 **X Lourena C Mellott**

3-5-03

Signature, typed or printed name of registered agent and title 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

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Pres
LOURENA Mellott
3251 Deer Ridge Rd.
Cantonment, FL 32533

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: **X Lourena C Mellott**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-03 **850-477-6673**
Date Daytime Phone #

CR2E034 (10/02)