

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000061021

FILED  
May 09, 2007  
Secretary of State

Entity Name: BUTTS SNACKS-R-US VENDING CO.

**Current Principal Place of Business:**

204 NW 6TH AVENUE  
FLORIDA CITY, FL 33034

**New Principal Place of Business:**

**Current Mailing Address:**

204 NW 6TH AVENUE  
FLORIDA CITY, FL 33034

**New Mailing Address:**

FEI Number: 56-2435724

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BUTTS, JAMES R JR  
2518 EAST SUPERIOR STREET  
OPA LOCKA, FL 33054 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PCEO ( ) Delete  
Name: BUTTS, JAMES R  
Address: 2518 EAST SUPERIOR STREET  
City-St-Zip: OPA LOCKA, FL 33054

Title: V ( ) Delete  
Name: DONALDSON, RONALD  
Address: 204 NW 6TH AVENUE  
City-St-Zip: FLORIDA CITY, FL 33034

Title: ST ( ) Delete  
Name: WILLIAMS, LASHANDA  
Address: 702 NW 6TH COURT  
City-St-Zip: FLORIDA CITY, FL 33034

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: JAMES BUTTS

MR

05/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date