


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2005 8:00 am
Secretary of State

08-03-2005 90061 006 ***158.75

DOCUMENT # P93000019104

1. Entity Name
MAJOR MARKET VEND, INC.



Principal Place of Business
6432 BLACK DAIRY RD N, #11
SEFFNER, FL 33584 US

Mailing Address
6432 BLACK DAIRY RD N, #11
SEFFNER, FL 33584 US

50059595



2. Principal Place of Business
6432 BLACK DAIRY RD N, #11
 Suite, Apt. #, etc.

3. Mailing Address
6432 BLACK DAIRY RD N, #11
 Suite, Apt. #, etc.

07192005 Chg-P CR2E034 (10/03)

City & State
JEFFNER FL

City & State
JEFFNER FL

4. FEI Number
59-3167938

Applied For
 Not Applicable

Zip
33584

Country
HILLS

Zip
33584

Country
HILLS

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

6. Name and Address of Current Registered Agent

SAVIDGE, NELSON
6432 BLACK DAIRY RD N, #11
SEFFNER, FL 33584

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
6432 BLACK DAIRY RD N, #11

City **JEFFNER** FL Zip Code **33584**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

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

10. OFFICERS AND DIRECTORS	
TITLE D <input type="checkbox"/> Delete	SAVIDGE, NELSON 6432 BLACK DAIRY RD N, #11, SEFFNER, FL 33584
TITLE D <input type="checkbox"/> Delete	SAVIDGE, MARIE 6432 BLACK DAIRY RD, #11 SEFFNER, FL 33584
TITLE <input type="checkbox"/> Delete	
TITLE <input type="checkbox"/> Delete	
TITLE <input type="checkbox"/> Delete	
TITLE <input type="checkbox"/> Delete	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	6432 BLACK DAIRY RD N, #11
TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	6432 BLACK DAIRY RD N, #11
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

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]* Pres Date: July 20, 2005 Daytime Phone #: 727 515 1477

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR