FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000027117 (9)

J & J VENDING, INC.

The part account	Principal	Place	of	Busino
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Mailing Address

FILED Apr 29 1997 8:00am Secretary of State



5340 KALMIA (ORLANDO FL		5340 KALMIA DRIVE ORLANDO FL 32807-1723								
			3. Date Incorporated or Qualified 04/09/1993	3a. Date of Last Report 04/16/1996						
2. Principal Place of Business		2e. Mailing Address				4. FEI Number	V3/	טען נענ	Applied For	_
21		26	26		59-3178786		-	Not Applicab	ole	
Suite, Apt. #, etc.		Suite, Apt #, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	SQ 75 Additional			
22		27				5. Certificate of Status Desired	<u> </u>	Fee	Required	
City & Stat	e	City & State				6. Election Campaign Financing		\$5.0	00 May Be	
23	28					Trust Fund Contribution			ed to Fees	
Zip	Country	Zip	Country			8. This corporation has liability for intangible tax under s. 199.032,				
24	25 29 30 30 9. Name and Address of Current Registered Agent				Florida Statutes Yes No					
500		enr negisteren wählt		B1	Name	10. Name and Address of New Re	gistered <i>i</i>	agent		
	VNEY, MARTHA				radific		•			
) KALMIA DR	1		82	Street Ad	dress (P.O. Box Number is Not Acceptab	lo)			
UHL	ANDO FL 32807		ł	83						
			ŀ							
			ĺ	84	City		FL	85 Z	'ıp Code	
11. Pursuant office or r	to the provisions of Sections 607.0 registered agent, or both, in the Start tamiliar with and appears the selections.	502 and 607.1508, Florida Statut te of Florida, Such change was	es, the ab authorized	oove by	named c	orporation submits this statement for the p ration's board of directors. I hereby accep		 changin pintment	g its registere as registered	ıd
	and accept the obli	igations of, Section 607.0305, Fi	unua stati	แบร	i.					
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOT	f : Registered	i Ago	nt signature re	quired when reinstating)	DATE			.,
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECT	ORS IN 12	- G
TITLE	P	☐ DELETE	1.1 717	LF				Chang	ge 🔲 Addilio	on S
NAME	DOWNEY, MARTHA		1.2 NAME							3
STREET ADDRESS	5340 KALMIA DR		1.3 STREET ADDRESS		ADDRESS					5
CITY-ST-ZIP	ORLANDO FL		1.4 CITY- S1- ZIP		I - ZIP					Š
TITLE	VP_	☐ DELFTE	DELETE 21 TITLE		İ			Chan	ge 🔲 Additio	on C
Name	DOWNEY, JOHN	2 2 NA		ME	ĺ					
STREET ADDRESS			2 3 51	REFT	address					
CITY-ST-ZIP	ORLANDO FL		2 4 Ci		1 - Z)P					
TITLE	8	DELETE	DÉLÉTÉ 31 TITLE				Chan	ge 🔲 Additio	JD.	
NAME	GREEN, BEVERLY JOAN	. 3.2 NAM		ME						
STREET ADDRESS	266 SUNSHINE DR.		3.3 \$10	REET.	address					
CITY-ST-ZIP	COCONUT CREEK FL		3.4. CI	1Y-S	T - ZIP					
TITLE	T	L] DELETE	DELETE 4.1 TITLE					Chang	ge 🔲 Additio)n
NAME	Smith, Martha J		4. 2 NAME							
STREET ADDRESS	2234 FAXON CT.		4.3 ST	REE1.	ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32812		4.4 CI1	Y - S1	I - ZIP					
TITLE		☐ DELE1E	5.1 1(1	LE				Chang	je 🔲 Additio	วก
NAME			5.2 NA	ME						
STREET ADDRESS			5.3 \$16	REET	ADDRESS					
CITY+ST+ZIP			5.4 CIT	Y-\$1	- ZIP					
TITLE		☐ DELETE	6.1 111	ιE				Chang	ge 🔲 Additio	חנ
NAME			6.2 NA	ME	_ []					-
STREET ADDRESS			6.3 STI	RELL	ADDRESS			. .		
CITY-ST-ZIP	a, 4 w		6.4 CN	Y- \$1	- 7IP			- •	-	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JULIA SYCKONOLURI RECOLURIED