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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000038570 (6)

WARMAL VENDING, INC.

FILED Apr 28 1998 8:00am Secretary of State

Principal Place of Business				Mailing Address					- I TOUREAL UN INCONTRAT NATUR NATUR DATE NATUR STAN SAINS	WILLIAM IN	Air Bâil Iâdi	
3212 WOODRUFF DR			(PO BOX 690631								
ORLANDO FL 32837				ORLANDO FL 32869					DO NOT WRITE IN THIS SPACE			
US			,	US					3. Date Incorporated or Qualified			
									05/24/1993			
2. Principal Pl	ace of Busi	nass	28.	Mailing Address					4. FEI Number	TAC	plied For	
21			26	-n ~					59-3180715		t Applicable	
Suite, Apt. #, etc.				Suite, Apt #, etc.					\$8	.75 /	Additional	
22				7					5. Certificate of Status Desired L	ee Re	equired	
City & State				City & State							May Be	
23			28								to Fees	
Ζιρ	Country		\vdash	· ' —		Country			8. This corporation owes or has paid the current year.	_	angible No	
24	25 9. Name and Address of Curren		29						Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent		7 100	
			ent Regis	tered Agent		81	Na	me	(U. Haille and Addless of New Hogistered Agent			
MALDONADO, RICHARD				l								
3212 WOODRUFF DR				8			Str	eet Addre	ess (P.O. Box Number is Not Acceptable)			
ORLANDO FL 32837												
Ì						84	Cit	ty	FL 85	Zip (Code	
11. Pursuant	to the provis	sions of Sections 607.0	502 and 6	07.1508, Florida Statu	ites, the	above	e-nar	ned corpo	pration submits this statement for the purpose of chan	ging it	s registered	
office or re	edistered a	gent, or both, in the Str vith, and accept the ob	ite of Flori	da. Such change was	authori.	zed by	/ the	corporatio	on's board of directors. I hereby accept the appointment	ent as	registered	
	· · · · · · · · · · · · · · · · · · ·	not, and accept the co	g.aob c	., 000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
SIGNATURE	Signature type	d or printed name of registered	and bee troogs	if applicable (NO	TE Regist	erect Age	ent sign	nature require	d when reinstating) DATE			
12.		OFFICERS /	AND DIREC		1:				ADDITIONS/CHANGES TO OFFICERS AND DIRE		Addition	
TITLE	P			DELETE		1 TITLE				ange	L3 Addition	
NAME		ONADO, RICHARD				2 NAME						
STREET ADDRESS		WOODRUFF DRIVE				3 STREET						
CITY-ST-ZIP	VPS	NDO FL		DELETE	_	1 CITY - S 1 TITLE	51 - ZIP			hanne	Addition	
TITLE		EN, JULIUS W.		[] bettire	l l	2 NAME		1	<u></u>	ia.igv		
NAME		TROPIC STREET				2 MANNE 3 STREET	LADDO	ecc				
STREET ADDRESS		VILLE FL				4 CITY-						
CITY-ST-ZIP TITLE	11100	100010		DELETE	_	1 TITLE	o i ∙ £ir			hange	Addition	
NAME						2 NAME						
STREET ADDRESS					3.	3 STREET	r adda	ESS				
CITY-ST-ZIP						4. CITY-		T T				
TITLE				DELETE		1 TITLE		<u> </u>	□ c	hange	Addition	
NAME					4.	2 NAME						
STREET ADDRESS					4.	3 STREET	ADDR	RESS				
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TITLE			•	DELETE	5.	1 TITLE			□ 0	hange	Addition	
NAME					5	2 NAME						
STREET ADDRESS					5	3 STREET	T ADDF	RESS				
CITY-ST-ZIP						4 CITY-S	ST-ZIP			<u></u>	T (Januara)	
TITLE				☐ DELETE	- 1	1 TITLE			L) (hange	Addition	
NAME					1	2 NAME						
STREET ADDRESS					6.	3 STREET	T ADDF	RESS				

14. 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 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.