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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morisiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000002246 (4)

1. Corporation Name
NEW VENDING CONCEPTS, INC.

Principal Place of Business: 265 SOUTH FEDERAL HWY, SUITE 289, DEERFIELD BEACH FL 33441
Mailing Address: 265 SOUTH FEDERAL HWY, SUITE 289, DEERFIELD BEACH FL 33441

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified: 01/04/1994
3a. Date of Last Report: 01/04/1994
4. FEI Number: 65-045-8913
5. Certificate of Status Desired: \$5.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21
2a. Mailing Address: 26
22. Suite, Apt. #, etc.:
23. City & State:
24. Zip: 25. Country:
26. Suite, Apt. #, etc.:
27. City & State:
28. Zip: 29. Country:

9. Name and Address of Current Registered Agent
**SIEGEL, RONALD L
2424 NORTH FEDERAL HWY
SUITE 3809
BOCA RATON FL 33431**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City: **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEINTRAUB, SELMA	1.2 NAME	
STREET ADDRESS	265 S. FEDERAL HWY #289	1.3 STREET ADDRESS	
CITY - ST - ZIP	DEERFIELD BEACH FL 33441	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEINTRAUB, MORRIS	2.2 NAME	200001391342
STREET ADDRESS	265 S. FEDERAL HWY #289	2.3 STREET ADDRESS	-01/27/95--01054--017
CITY - ST - ZIP	DEERFIELD BEACH FL 33441	2.4 CITY - ST - ZIP	****200.00 ****200.00
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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: *Selma Weintraub* SELMA WEINTRAUB Date: *Jan. 13, 1995* 107-308-1407