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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

Sep 05 1997 8:00am

218-708-343V

		iry of State CORPORATIONS	Secret	Secretary of State		
DOCUI 1. Corporation	MENT # P9400 VENDING CORP.	0026645 (9)			BIJI BENYA USIN BIJIK BIYAK BIJAK BIJIK BADK	
Principal Place	e of Rusiness	Mailing Address				
Principal Place of Business ### Mailing Address #### LONBARDY ST 118 N. MIAMI BEACH FL 33162 US						
				04/07/1994	3a. Date of Last Report 07/03/1996	
	MI WISH POINT	2a, Mailing Address		4. FEI Number 59-3244053	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	POAD FLOUDD	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 3V	Country 25	Zip	Country 30	8. This corporation has liability fo		
	9. Name and Address of Curr		81 Name	10. Name and Address of New R	egistered Agent	
	TED CORPORATE SERVICES, I N.E. 167TH ST.	ING.				
SUITE 300 N. MIAMI BEACH FL 33162			82 Street	Address (P.O. Box Number is Not Accepte	ible)	
			83			
			84 City		FL 85 Zip Code	
office or re	to the provisions of Sections 607.03 egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida. Such change was:	authorized by the corp	corporation submits this statement for the poration's board of directors. I hereby according	purpose of changing its registered	
SIGNATURE		·				
12.	Signature, typed or printed name of registered a OFFICERS A	ND DIRECTORS	 Registered Agent signature 13. 	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
TN'LE	0	DELETE	1.1 TITLE		Change Addition	
NAME 🚙	BARR, RAY A 10 BANK ST.	• •	1.2 NAME		}	
STREET ADDRESS	WHITE PLAINS NY 10606		1,3 STREET ADDRESS			
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition	
NAME	skubicki, mark		2.2 NAME		_ • _	
STREET ADDRESS	10 BANK ST.		2.3 STREET ADDRESS			
CITY-ST-ZIP	WHITE PLAINS NY 10606		2 4 CITY-ST-ZIP			
TITLE	GESSER, JEFFREY	DELETE	3.1 TITLE		Change	
NAME STREET ADDRESS	H#LOMBARDY ST		3.2 NAME 3.3 STREET ADDRESS			
CITY-ST-ZIP	BROOKLYN NY 11222		3.4. CITY-S1-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME	60000228	35486 100 - 000	
STREET ADDRESS			4.3 STREET ADDRESS	-09/08/97010 ***173.75	103~-036	
CITY-ST-ZIP		DELETE	4.4 CHY-ST-7IP	**************************************	Change Addition	
TITLE NAME		C) DECCIE	5.1 TITLE . 5.2 NAME		The cualific Property	
STREET ADDRESS			5.3 STREET ADDRESS		4,5	
DITY-ST-ZIP			5.4 CITY - ST - ZIP		•	
TITLE	,	DELETE	61 TITLE		Change Addition	
NAME ,			6.2 NAME	50000228 -00/00/97- 019	が ら4 は ち (105000	
STREET ADDRESS			6.3 STREET ADDRESS	50000226 -09/08/97010 ***385.00	up==000	
CITY-ST-ZIP	ov certify that the information suppl	ind with this filing does not avail	6.4 CITY-ST-ZIP	stated in Section 119.07(3)(i), Florida Statul		
informatio I am an of	in indicated on this annual report of	r supplemental annual report is t or the receiver or trustee empoy	true and accurate and vered to execute this i	d that my signature shall have the same leg report as required by Chapter 607, Florida	gal effect as if made under oath; that	