2004 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

changed, or on an attachment with an address, with all other like empowered.

Apr 14, 2004 08:00 AM Secretary of State DOCUMENT # P94000079903 1. Entity Name E & T VENDING, INC. Principal Place of Business Mailing Address 38 FURNESS PLACE PO BOX 354098 PALM COAST, FL 32137 PALM COAST, FL 32137 US 01212004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3279482 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MITCHELL, EDWARD DO NOT WRITE 38 FURNESS PALCE PALM COAST, FL 32137 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees U00000112697 /14/04-80033- OFFICERS AND DIRECTORS 10. NAME MITCHELL, EDWARD 38 FURNESS PL STREET ADDRESS CITY - ST - ZIP PALM COAST, FL 32137 TITLE MITCHELL, PHYLLIS STREET ADDRESS 38 FURNESS PLACE CITY-ST-ZIP PALM COAST, FL 32137 TITLE WILLIAM, JUNE M NAME STREET ADDRESS 38 FURNESS PL DO NOT WRITE CITY-ST-ZIP PALM COAST, FL 32137 TITLE IN THIS SPACE NAME MITCHELL, EDWARD STREET ADDRESS 38 FURNESS PL PALM COAST, FL 32137 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 Statutès. 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

FILED

(3867 446-0332