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

∠ PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000011467 (4)

VENDING COMMUNICATIONS INCORPORATED

Principal Place of Business

Mailing Address

180 NW 176TH STREET

CIGNATURE.

160 NW 176TH STREET

FILED May 01 1998 8:00am Secretary of State



2-26-98 1305)621-0076.

2. Principal Place of Business 2a. Mailing 21 /637/ N.W. 57h Award 26 P. C. Suite 22 27 City & State 28 Miam' FC 28 Y		1016			3. Date Incorporated or Qualified 02/08/1995			
21 /637/ N.W. 574 AND 26 P. C Sulte, Apt. #, etc. 22 27 City & State 23 Miami, FL Zip Country Zip	0. Box 64	1016						
Sulte, Apt. #, etc. Suite City & State City & State Zip Country Zip Country Suite Suite Suite Suite Zip		10160			4. FEI Number		ПА	pplied For
Sulte, Apt. #, etc. Suite City & State City & State Zip Country Zip Country Suite Suite Suite Suite Zip		1.W. 574 AMPUL 26 P.O. BOX 640/60			65-0566617		N	lot Applicable
28 Miami, FC 28 Y	Suite, Apt. #, etc.				5. Certificate of Status Desired	SR 75 Additional		
Zip Country Zip	\neg ω				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
		Cour	try		8. This corporation owes or has pa	id the curre	ent war In	
24 350/4 25 05 29 35/		01			Personal Property Tax due June 10. Name and Address of New Re			
	Agent		11 Nar	ne	ID. Name Elia Address of New No.	Rietaron V	Acur	
AELION AND LOREN, P.A.								
152 NE 187TH STREET		[i	32 Stre	et Addre	ess (P.O. Box Number is Not Acceptat	ole)		
FIFTH FLOOR		-	33					
N. MIAMI BEACH FL 33162			23					
•		1	34 City			F#1	85 Zip	Code
						FL	للــــــــــــــــــــــــــــــــــ	
 Pursuant to the provisions of Sections 607.0502 and 607.155. office or registered agent, or both, in the State of Florida Suagent. I am familiar with, and accept the obligations of, Sections. 	ich change was aut	lhorized	by the o	ea corpo orporation	oration submits this statement for the pon's board of directors. I hereby accep	ot the appo	intment as	registered
SIGNATURE Signature, typed or printed name of registered agent and title it applies				ure require	id when reinstating)	DATE		
12. OFFICERS AND DIRECTORS		13.	agont aigne	icre ibquito	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TITLE P	DELETE	1.1 T(T(E	10/	uner/P.		Change	Addition
NAME SUSI, ALBERTO J.		1.2 NAM		C	si subject T	4		
STREET ADDRESS 160 NW 176TH STREET #205			EET AOORES		SI, PHILOUP .	1 1	in	
N MARKET CO COC				° 100	si, Alberto J. O. Box 640160 Jami, Fr. 33164-0160	- 14/	H	
CITY-ST-ZIP N. MIAMI FL 33109	DELETE	2.1 TITL	r-ST-ZIP	////	10111,14 33/64-0160		Change	☐ Addition
	occir	2.7 NAN					Ondrigo	
NAME				.				
STREET ADDRESS		Į.	EET ADDRES	S		.e		
CITY-ST-ZIP	DELETE		Y-S1-ZIP			₁	Change	Addition
TITLE	L Detert	3.1 1111		ļ		.'	Cradings	Manison
NAME		3.2 NAM						
STREET ADDRESS		3.3 STR	eet addres	s				
CITY-ST-ZIP	T DECETE		Y-ST-71P				10	4.4400
TITLE	☐ DELETE	4.1 TITE				ι	Change	☐ Addition
NAME		4. 2 NA						
STREET ADDRESS		4.3 STR	EET ADDRES	s				
CITY-\$T-ZIP		4.4 CITY	-ST-ZIP					
TITLE	☐ DELETE	5.1 TITL	Ē			l	Change	Addition
NAME		5.2 NAN	IE.					
STREET ADDRESS		5.3 STR	eet addres	s				
CITY-ST-ZIP		5.4 CITY	- ST - ZIP					
TITLE	DELETE	6.1 TITL	F				Change	Addition
NAME		6.2 NAN	1E					
STREET ADDRESS		6.3 STR	EET ADDRES	s				
CITY-ST-ZIP			-ST-ZIP					
14. I hereby certify that the information supplied with this filing d indicated on this annual report or supplemental annual report	loes not qualify for t	the exer	nption st	ated in S	Section 119.07(3)(i), Florida Statutes. I	further cer	ify that the	information