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May 08, 1999 8:00 am
Secretary of State

05-08-1999 90023 018 ***150.00

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000027562

1. Corporation Name
L & G VENDING, INC.



Principal Place of Business
**5100 S CLEVELAND AVE #402
FT MYERS FL 33907**

Mailing Address
**5100 S CLEVELAND AVE #402
FT MYERS FL 33907**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/01/1996

4. FEI Number

65-0652365

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 **646 NE 15th CT**

Suite, Apt. #, etc.

22

City & State

23 **CAPE CORAL FL**

Zip

24 **33909**

Country

25 **US**

2a. Mailing Address

26 **646 NE 15th CT**

Suite, Apt. #, etc.

27

City & State

28 **CAPE CORAL**

Zip

29 **33909**

Country

30 **US**

9. Name and Address of Current Registered Agent

**GERMAN, LAWRENCE JR
5100 S CLEVELAND AVE #402
FT MYERS FL 33907**

**ADDRESS
CHANGE
ONLY**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

646 NE 15th COURT

83

84 City

CAPE CORAL

FL

85 Zip Code

33909

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Signature typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Lawrence German, President 4-13-99

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **GERMAN, LAWRENCE JR**
STREET ADDRESS **5100 S CLEVELAND AVE #402**
CITY-ST-ZIP **FT MYERS FL 33907**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**646 NE 15th COURT
CAPE CORAL FL 33909**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE

Lawrence German
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

LAURENCE GERMAN 4-13-99 (941) 263-2810

CR2E034 (11/98)