

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**REINSTATEMENT**

**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Mortham**  
Secretary of State

**DIVISION OF CORPORATIONS**

RECEIVED  
AND  
FILED

99 JAN -4 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P96000036480**

1. Corporation Name

**ROYAL VENDING, INC.**

Principal Place of Business

Mailing Address

4523 30TH ST. W.  
511  
BRADENTON FL 34207  
US

4523 30TH W.  
511  
BRADENTON FL 34207  
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

04/26/1996

5. FEI Number

65-0661524

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DPS	SHOCKLEY, JOHN D	309 45TH ST CT NW	BRADENTON FL 34209
DVT	MULLINS, DANIEL L	2706 59TH ST CT W	BRADENTON FL 34209

200002731262--6  
-01/06/99--01005--005  
\*\*\*\*700.00 \*\*\*\*700.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MEISSNER, GREGORY C  
1111 3RD AVE W #150  
BRADENTON FL 34205

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Date

12/01/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/01/98

Daytime Phone #

941-739-5505

CR2E040 (9/98)

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>	 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000036480 (7)**

1. Corporation Name  
**ROYAL VENDING, INC.**



Principal Place of Business <b>4523 30TH ST. W. 511 BRADENTON FL 34207 US</b>	Mailing Address <b>4523 30TH W. 511 BRADENTON FL 34207 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country		2a. Mailing Address <b>25</b> Suite, Apt. #, etc. <b>26</b> City & State <b>27</b> Zip <b>28</b> Country		3. Date Incorporated or Qualified <b>04/26/1996</b>	
4. FEI Number <b>65-0661524</b>		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		7. <b>\$5.00</b> May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>MEISSNER, GREGORY C 1111 3RD AVE W #150 BRADENTON FL 34205</b>		10. Name and Address of New Registered Agent <b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <b>FL</b> <b>85</b> Zip Code	
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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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DPS</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SHOCKLEY, JOHN D</b>	1.2 NAME	
STREET ADDRESS	<b>309 45TH ST CT NW</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BRADENTON FL 34209</b>	1.4 CITY-ST-ZIP	
TITLE	<b>DVT</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MULLINS, DANIEL L</b>	2.2 NAME	
STREET ADDRESS	<b>2706 59TH ST CT W</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BRADENTON FL 34209</b>	2.4 CITY-ST-ZIP	
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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/98)

To who it may concern,

This letter is to explain what has happened. I sent the report & a check for \$550.00 in September 1998. The check was never cashed so I assume that it was never received. I called Your offices and was informed to send another check for \$550.00 and another \$150.00 for the year of 1999. So enclosed is a check for \$700.00 and a copy of a copy of the report I filed in September

Thank You,

John Shockley, President  
Royal Vending Inc.  
4523 30th St W Suite 571  
Bradenton FL 34207  
941-739-5505