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

Mailing Address

5300 GRANT STREET

28. Mailing Address

HOLLYWOOD FL 33021-5747

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

5300 GRANT STREET

HOLLYWOOD FL 33021



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For

3. Date Incorporated or Qualified

07/08/1996

4. FEI Number

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000056947 (0)

C & M SODA AND SNACK MACHINES, INC.

21		26					6	5-068	0011	No.	Applicable
Suite, Apt	#, etc	Suite,	Apt. #, etc.				سم ا	tificate of Status Desire	_	\$8.75 A	dditional
22		27					0. Cert	inicate of Status Desire	٠	Fee Re	quired
City & Stat	0	City &	State				6. Elec	tion Campaign Financi	ing	\$5.00	May Be
23		[28[Trus	t Fund Contribution		Added to	o Fees
Zip	Country	itry Zip			intry		8. This	corporation has liabilit	y for intangib	le tax under s.	199.032,
24	25	29		30			- (ida Statutes		☐ No	
	9. Name and Address of Currer	t Registered A	gent				10. Nan	ne and Address of Ne	w Registere	1 Agent	
SAU	IREL, MARGARET				B1	Name					
5300 GRANT STREET						82 Street Address (P.O. Box Number is Not Acceptable)					
HOLLYWOOD FL 33021					5 Street Address (F.O. Box Number is Not Acceptable)						
					83						
			4					··			
					84				F		
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 bereby accept the appointment as 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 ag-	ered Agent algorature required when reinstating) DATE									
12.	OFFICERS AND DIRECTORS			13.			ADDI	TIONS/CHANGES TO	OFFICERS AN		
TITLE	D CALIFORNIA CARDI	D DELETE			TLE)				Change	Addition
NAME	SAUREL, CARL			1.2 N	AME						[;
STREET ADDRESS	5300 GRANT STREET			1.3 S	TREET	address					Ji
CHY-SI-ZIP	HOLLYWOOD FL 33021			1.4 C	ITY-ST	T - ZIP					
THE	D DELETE			2.1 1	2.1 TITLE					Change	Addition
NAME	SAUREL, MARGARET			2.2 N	AME						
STREET ADDRESS	5300 GRANT STREET			238	TAEET	ADDRESS]
CITY - \$1 - ZIP	HOLLYWOOD FL 33021			2.40	ITY - S	T-ZIP					1
TITLE	DELETE			3.1 7	TLE				1	☐ Change	Addition
NAME				3.2 N	AME						ļ
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GHY+51-2IF					HY-S	l.					
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14[[DELETE			TLE	-20"				Change	Addition
NAMÉ				5.2 N						Free Alvanda	
STREET ADURESS						ADDRESS					
CHY ST-74			DELETE	54C	ITY-ST	- 447				Change	Addition
			Detric	- 1		1				- Owning	L. TOURIUM
NAM!				6.2 N							
STREET ADDRESS	ì				6.3 STREET ADDRESS 6.4 CITY-ST-ZIP						
CITY ST-7IP	Learnity that the information supplie	ri with this filing	dogs not qualif	v for the	AVAI	notion state	od in Section	110 07/31/N Elected P	tatutae I funti	or cortify that	the .
informatic	oy certify that the information stipplie on indicated on this annual report or softleer or director of the corporation of	supplemental ar	nnual report is to	ue and	accy	rption states	at my signatu	ure shall have the same	e legal effect	as if made unc	der oath; that
l arti an o	officer or director of the corporation or in Block 12 or Block 13 if changed, •	the receiver or r on an attachm	trustee empow	ered to d	вхесу	te this repo	ort as require	ed by Chapter 607, Flo	rida Statutes;	and that my n	ame
SIGNAT	URE: X SIGNATURE AND TYPED OF	ougare	1 10		+ 1	1		4/8 /9	7 /95	1894-3	T26
	SIGNATURE AND TYPED OF	PRINTED NAME OF	BIGNING OFFICER	OH DIREC	TOR			Date		Daytime Prione #	