## 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 # P96000068014 (5)

ST. JOHN'S VENDING, INC.

Principal Place of Business Mailing Address
781 NOTTINGHAM FOREST CIRCLE 781 NOTTINGHAM FOREST CIRCLE

FILED Apr 20 1998 8:00am Secretary of State



SWITZERLAND FL 32259 SWITZERLAND FL 32259 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3399094 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RODRIGUEZ, ROBERT 781 NOTTINGHAM FOREST CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) SWITZERLAND FL 32259 83 84 City 85 Zip Code

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 lifle if applicable (NOTE: Registered Agent signalure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE Change \_\_\_ Addition TITLE 1.1 TITLE RODRIGUEZ, ROBERT NAME 1 2 NAME 781 NOTTINGHAM FOREST CIRCLE STREET ADDRESS 1.3 STREET ADDRESS **SWITZERLAND FL 32259** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE RODRIGUEZ, BARBARA L NAME 22 NAME 781 NOTTINGHAM FOREST CIRCLE STREET ADDRESS 2.3 STREET ADDRESS **SWITZERLAND FL 32259** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 34. CITY-ST-ZIP CITY ST ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF TITLE DELETE Change Addition 61 TITLE 6.2 NAME NAME STREET ADDRESS **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 one attachment with an address.

SIGNATURE: Little

Blut Reding S Robert Podr

4-14-98

(904)287-7863

H2E034 (10/97)