

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90460 010 ***150.00

DOCUMENT # P96000093978

1. Entity Name
ED'S VENDING, INC.

Principal Place of Business 1313 N TAMPA ST TAMPA FL 33602 US	Mailing Address 315 COMO ST APT B TAMPA FL 33606 US
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0063291



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 11205 W. ANNETTE AVE	3. Mailing Address 11205 W. ANNETTE AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State TAMPA FL	City & State TAMPA FL
Zip 33612-5710	Country USA

4. FEI Number 59-3414319	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SANDERS, EDWARD E
~~315 COMO ST~~ **11205 W. ANNETTE AVE**
~~APT B~~
TAMPA FL ~~33606~~ 33612-5710

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SANDERS, EDWARD E 418 DANUBE AVE. TAMPA FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SANDERS, EDWARD 418 DANUBE AVE TAMPA FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SANDERS, EDWARD E 418 DANUBE AVE TAMPA FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, VP, ST SANDERS, EDWARD E 11205 W. ANNETTE AVE TAMPA, FL 33612-5710
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward Sanders **President** Date **4/30/01** Daytime Phone # **813/615-1433**

CR2E034 (10/00)