2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 04, 2004 8:00 am **Secretary of State** DOCUMENT # P96000095989 1. Entity Name 02-04-2004 90028 046 ***150.00 ARTHUR VENDING SERVICES, INC. Principal Place of Business Mailing Address 758 PLANTATION DR. TITUSVILLE FL 32780 758 PLANTATION DR. TITUSVILLE FL 32780 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) 4. FEI Number :59-3412039 City & State City & State Applied For Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O.Box Number is Not Acceptable) ARTHUR, GEORGE 711 CAMARAGUE PLACE **APT 105** LAKE MARY FL 32746 Zip Code 3278 C 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Delete ☐ Change ☐ Addition George Arthur NAME GEORGE H. ARTHUR NAME STREET ADDRESS 711 CAMARAGUE PLACE, 105 758 Plantation Drive STREET ADDRESS LAKE MARY FL 32746 CITY-ST-ZIP CITY-ST-ZIP Titusville, Florida 32780 VΡ TITLE Delete TITLE ☐ Change ☐ Addition Dawn Arthur NAME DAWN M. ARTHUR NAME STREET ADDRESS 711 CAMARAGUE PLACE, 105 STREET ADDRESS 758 Plantation Drive LAKE MARY FL 32746 CITY-ST-7IP CITY-ST-ZIP <u>Titusville Florida 32780</u> TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI E Change · Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

SIGNATURE: