2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)-

Feb 02, 2005 8:00 am Secretary of State DOCUMENT # P96000095989 1. Entity Name 02-02-2005 90060 037 ***150.00 ARTHUR VENDING SERVICES, INC. Principal Place of Business . -- Mailing Address 758 PLANTATION DR. TITUSVILLE FL 32780 758 PLANTATION DR. TITUSVILLE FL 32780 JUUUULTO 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 1st MOORE City & State City & State Applied For 4. FEI Number 59-3412039 Not Applicable Zip Country 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 ARTHUR, GEORGE Street Address (P.O. Box Number is Not Acceptable) 758 PLANTATION DRIVE **APT 105** TITUSVILLE FL 32780 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 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 Change ☐ Addition ☐ Delete GEORGE H. ARTHUR NAME STREET ADDRESS 758 PLANTATION DRIVE -STREET ADDRESS CITY-ST-ZIP TITUSVILLE FL 32780 CITY-ST-ZIP ☐ Delete TITLE Change Addition DAWN M. ARTHUR NAME NAME STREET ADDRESS 758 PLANTATION DRIVE STREET ADDRESS TITUSVILLE FL 32780 CÎTY STEZP CiTY-ST-7IP ☐ Delete Addition NAME STREET ADDRESS STREET ADDRESS City-St-7IP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP TITLE ☐ Change Addition THE Delete NAME NAME STREET ADDRESS STREET ADDRESS

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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. SIGNATURE: •

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