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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

CITY-ST-ZIP

P97000035266 (0)

PROSPER VENDING, INC.

			A									
Principal Place of Business Mailing Address									1 45011551 413 13111 13611 46111	Abili bailt anin	• :::s: 5:::4 ::5:5	
3811 NE 27		3811 NE 27TH AVE										
LIGHTHOUSE POINT FL 33064				LIGHTHOUSE POINT FL 33064					DO NOT WRITE IN THIS SPACE			
									3. Date Incorporated or Quali	ied		
									03/07/1997			
2. Principal P	lace of Busines	SS	28.	Mailing Address				· · · · ·	4. FEI Number		1A	oplied For
21		26	26					65-078304	0	No	ot Applicable	
Suite, Apt.	#, etc.		Suite, Apl. #, etc.				•	5. Certificate of Status Desire	d 🗆	\$8.75		
22		27	<u> </u>					9. Commonte of dialog besite		Fee Re	equired	
City & Stat	e	ļ,	City & State					6. Election Campaign Financi		\$5.00		
23		28						Trust Fund Contribution		Added		
└ ──	Zip Country			'			Country		8. This corporation owes or h			tangible TNo
24	2!	<u> </u>	29	laved Agent	30				Personal Property Tax due 10. Name and Address of Ne			
		nd Address of Curre	ent Regist	tered Agent		81	Na	ame	10. Name and Address of No	m mogratore	a Agoilt	
	PURDY, RICH											
	SHALLER, PU	4 .			82	Str	reet Addre	ess (P.O. Box Number is Not Acc	eptable)			
	1322 SE 3RD										··	
	T LAUDERDA	ALE FL 33316				83						
}						64	Cit	ty		F	85 Zip	Code
44 Pursuant	to the provision	ns of Sections 607 05	502 and 60	07 1508 Florida Statu	tes the	abovo	L o∗nar	med corp	oration submits this statement for	the purpose	of changing if	ls registered
nffice or r	rodielarod ader	at or both in the Stat	te of Horic	la. Such change was , Section 607.0505, Fi	.authoriz	red by	/ the	corporati	ion's board of directors. I hereby	accept the a	opointment as	registered
agent. i a	am t a mıllar witii	, and accept the obli	igations or	, Section 607.0505, F1	ionua Si	aiules	5.					
SIGNATURE	Stoneture, typed or	profed name of registered a	igent and tibe	if applicable (NO	It Registe	red Ago	onit eig	nature require	ed when reinstating)	DATE		
12.		OFFICERS A			13	3.			ADDITIONS/CHANGES TO	DFFICERS A		
TITLE	D			☐ DELETE	1.1	TITLE					Change	Addition
NAMÉ	SPREY,	PATRICIA A			1.2	NAME						
STREET ADDRESS	3811 N	E 27TH AVE			1.3	STREET	ADDR	IESS				
CITY - ST - ZIP	LIGHTH	<u>Ouse point fl 3</u>	3064		1.4	CITY-S	1 - ZIP					T 1
TITLE	1			☐ DELETE	2.1	TITLE					Change	Addition
NAME	Ì				2.2	NAME						
STREET ADDRESS					2.3	STREE 1	ADDR	ESS				
CITY-ST-ZIP				D DELETE		CITY - S	ST - ZIF	P			Change	Addition
TITLE				☐ DELETE		TITLE		1			Change	Addition
NAME						NAME						
STREET ADDRESS						STREET						
CITY-ST-ZIP	ļ			DELETE		CITY - S	\$T-ZIF				Change	Addition
TITLE	Ì			₩ DELETE		TITLE					[_1 Cumite	Radillon
NAME						2 NAME						
STREET ADDRESS						STREET						
CHTY-ST-ZIP				DELFTE		CITY - S	st - ZiP	·			Change	Addition
TITLE				DECEME				- 1			- 21.01.90	
NAME DESCRIPTION						NAME	ADDO					
STREET ADDRESS						STREET						
CITY-ST-ZIP				DELETE		CITY-S	51 - ZIP				Change	Addition
TITLE				בן ויבונונ								
NAME						NAME	LADDE	atec				
STREET ADDRESS	1				63	STREET	AUUP	11:05				

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 offect as if made under oath; that I am an officer or director of the corporation or this 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 chapter, or on an attachment with an address.

1-4.0A

054-783.9767

FILED

Jan 16 1998 8:00am

Secretary of State