## FÎLE 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** #

P97000035306 (4)

VENDING PARTNERS, INC.

**FILED** Apr 08 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					- I LEDAHED LIK IENIK IDAKA DOMA DONIK BANDO LANDI DIKIK DAKE TAKA MUDI	
	S2ND STREET	5300 N.W. 52ND STREET				
	CREEK FL 33073	COCONUT CREEK FL 33073				
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
2. Principal F	Place of Business	2a. Mailir	2a. Mailing Address			<b>04/21/1997 4.</b> FEI Number Applied For
21		26	1			65-0750132 Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			S8 75 Additional
22		27	1			5. Certificate of Status Desired Fee Required
City & Stat	te	City &	City & State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip Country		·	Zip Country		ry	8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curren	29 I Registered	Agent	30		Personal Property Tax due June 30. VI Yes No  10. Name and Address of New Registered Agent
AMERILAWYER CHARTERED					1 Name	10, reality and Address of How Hogistaton Agent
343 ALMERIA AVENUE				L	Has	View Kartigoner
CORAL GABLES FL 33134				8	Street Addi	ress (P.O. Box Number is Not Acceptable)
00172 0022012 00107				8		1000 36-11
					4 00	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
84   Cit					1 -77	anut Creak FL 85 Zip Code 33073
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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 HADER My Kartigoner President Hille					en ~ /d- 4/1/98	
<u></u>	Signature Typed or ported name of registered age OFFICE HS AND				gent signature requi	red when reinstating) DATE
12.	PSTD OF FICE HS 7(N)	DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	KARTIGANER, ANDREW M			1.2 NAM		Citalings Citation
STREET ADDRESS	5300 N.W. 52ND STREET				ET ADDRESS	
CITY-ST-ZIP COCONUT CREEK FL 3307				1.4 CITY		
TITLE			DELETE	2.1 TITLE		Change Addition
NAME				2.2 NAMI	:	
STREET ADDRESS				2.3 STRE	ET ADDRESS	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		-ST-ZIP	
TITLE			DELETE	3.1 TITLE		Change Addition
NAME				3.2 NAM	:	
STREET ADDRESS				3.3 STRE	ET ADDRESS	
CITY-ST-ZIP			<b>1 1 1 1 1 1 1 1 1 1</b>	3.4. CITY		
TITLE			☐ DELFTE	4.1 TITLE		Change Addition
NAME				4. 2 NAM	i	
STREET ADDRESS					ET ADDRESS	İ
CITY-ST-ZIP TITLE			DELETE	4.4 CITY		Change Addition
NAME				5.1 TITLE	I .	☐ Change ☐ Addition
STREET ADDRESS				5 2 NAMI	ET ADDRESS	
CITY-ST-ZIP					I .	
TITLE			DELETE	54 CITY- 61 TITLE		☐ Change ☐ Addition
NAME				6.2 NAMI		The state of the s
STREET ADDRESS					ET ADDRESS	
CITY-ST-ZIP				64 CITY	I .	

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 on an attachment with an address.