

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90069 031 ***150.00

0426590

DOCUMENT # P97000047699

1. Entity Name

WORLD CLASS VENDING, INC.

Principal Place of Business

632 DEER RUN N
 PALM HARBOR FL 34684
 US

Mailing Address

P.O. BOX 6136
 PALM HARBOR FL 34684
 US

2. Principal Place of Business

14460 60th St. N.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Clearwater 71

City & State

4. FEI Number

59-3447336

Applied For

Not Applicable

Zip

33760

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GARBER, JOAN
 632 DEER RUN N.
 PALM HARBOR FL 34684

7. Name and Address of New Registered Agent

Name

Joan Garber

Street Address (P.O. Box Number is Not Acceptable)

468 Klosterman Rd

Palm Harbor 71 34683

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

Denise Galante

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/13/01

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

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 ☐ Delete
 NAME D
 STREET ADDRESS GARBER, JOAN
 CITY-ST-ZIP 632 DEER RUN N
 PALM HARBOR FL 34684

TITLE ☐ Delete
 NAME ST
 STREET ADDRESS GALANT, DENISE
 CITY-ST-ZIP 632 DEER RUN N
 PALM HARBOR FL 34684

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME D
 STREET ADDRESS Joan Garber
 CITY-ST-ZIP 468 Klosterman Rd
 Palm Harbor 71 34683

TITLE ☒ Change ☐ Addition
 NAME ST
 STREET ADDRESS Denise Galante
 CITY-ST-ZIP 468 Klosterman Rd
 Palm Harbor 71 34683

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 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:

Denise Galante

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/01

Date

727 787 8339

Day

Phone #

CR2E034 (10/00)