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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000031668

Country

9. Name and Address of Current Registered Agent

25

TALLAHASSEE FL 32301-2525

1201 HAYS STREET

CORPORATION SERVICE COMPANY

Suite, Apt. #, etc.

City & State

Zic

W & A VENDING INC.

Principal Place of Business	Mailing Address	
iā ARROW COURT 5 CITY FL 33844	18 ARROW COURT HAINES CITY FL 33844	
2. Principal Place of Business	2a. Mailing Address	

27

28

29

Suite, Apt. #, etc.

City & State

Zip

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90014 049 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/06/1998 FEI Number Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes the current year Intangible MNo ☐ Yes Personal Property Tax. Name and Address of New Registered Agent is Not Acceptable)

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 pard accept the appointment as registered—agent. I am familiar with pard accept the appointment as registered— SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 12. OFFICERS AND DIRECTORS ☐ Change DELETE 1.1 TITLE TITLE DANIELS, WILLIAM E 1.2 NAME **18 ARROW COURT** 1.3 STREET ADDRESS STREET ADDRESS HAINES CITY FL 33844 1.4 CITY-ST-ZIP CITY-ST-ZIF □ DELETE ☐ Change ☐ Addition 21 T/T F TITLE DANIELS, ALICE M 2.2 NAME NAME 18 ARROW COURT 2.3 STREET ADDRESS STREET ADDRESS HAINES CITY FL 33844 2.4 CITY-ST-ZIP Addition Change DELETE 3.1 TITLE TITLE DANIELS, JOSEPH L 3.2 NAME 18 ARROW COURT 3.3 STREET ADDRESS STREET ADDRESS HAINES CITY FL 33844 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

Country

81 Name

82

83 84 City

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CITY-ST-ZIP 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 supplied with this limit does not qualify the last 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 changes, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

CR2E034 (11/98)