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 # P98000058096

BSS VENDING, INC.

FILED
Apr 23, 1999 8:00 am
Secretary of State
04 23 1000 00261 002 ***150 00

Principal Place of Business Mailing Address					T I INDIVIDUAL HIND HANDE ROLLI OUR HE DON'T BRANT OUR		(B 18118 B141 18B1		
5777_BENEVA.F	RD.S	5777_BENEVA_RD_S							<u></u>
SARASOTA FL 34233 SARASOTA FL 34233						DO NOT WRITE IN TH	IS SPACE		
						3. Date incorporated or Qualifed			7
			•			06/29/1998			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		pplied For	1
21		26				45-0849816		lot Applicable]
Suite, Apt.	. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75	Additional	
22	, , , , , , , , , , , , , , , , , , ,	27				5. Certificate of Status Desired		Required	4
City & State		City & State				6. Election Campaign Financing		May Be	}
23	28			intry		Trust Fund Contribution		to Fees	4
Zip	Country	Zip	30	anu y		This corporation owes the current year I Personal Property Tax.	ntangible ☐ Yes	₩ No	
24	9. Name and Address of Currer		30	T		10. Name and Address of New Registere			1
	5. Name and Address of Curton	it itogiaterea rigorit		81	Name		<u> </u>		7
1	WETT, DANIEL L			82	Stroot Addre	ess (P.O. Box Number is Not Acceptable)			-
	' Beneva RD S				Silber Addit	ess (i .c. box italibor is ito: / looplasts)			╛
SAR	ASOTA FL 34233			83					1
				84	City		85 Zip	Code	1
	ves.				•	<u> </u>	┖╵╵	_	_
office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was	authorized	iby:	the corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing it ointment as r	s registered registered	
SIGNATURE									
	Signature, typed or printed name of registered age			Agen	t signature required		ND DIDECT	ODE IN 40	-} §
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	Change		; ⊦.
TITLE	D Burns, Steven A	المرادات			}				
NAME	6225 AVENTURA DR		1.2 NAI		ADDRESS				8
STREET ADDRESS	SARASOTA FL 34241		1	TY-81	ì				5
CITY-ST-ZIP	D	☐ DELETE	2.1 TI				Change	Addition	,
NAME	SMITH. DOUGLAS		22 N		ļ				(
STREET ADDRESS	1432 GEORGETOWN CIR		2.3 ST	REET	ADORESS				
	CITY-ST-ZIP SARASOTA FL 34232		2.40						
TITLE			3.1 Π			Correctio	م ا Change	Addition	Ŋ.
NAME	SUGG, KEVIN		3.2 N	4ME		•			
STREET ADDRESS	1604 GEORGETOWN CIR		3.3 S	TREET	ADDRESS 1	604 Georgetown Blud			}
CITY-ST-ZIP	SARASOTA FL 34232		3.4. C	ΠY-S	T-ZIP				1
TITLE		☐ DELETE	4.1 TI	TLE		<i>y</i> -	☐ Change	☐ Addition	-
NAME	* .		4.2N	AME					
STREET ADDRESS			4.3 ST	TREET	ADDRESS				1
CITY-ST-ZIP				TY-S1	r-zip				4
TITLE		☐ DELETE	5.1 TT		ĺ		Change	Addition	
NAME			5.2 N						1
STREET ADDRESS					ADORESS				
CITY-ST-ZIP		DELETE	5.4 CF 6.1 TI	TY-ST	·ZIP		Change	Addition	\exists
TITLE			6.2 N		ł		L. Criange	. <u>L.</u> 700111011	
NAME					ADDRESS				
STREET ADDRESS	ı			TV-S1	J				

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, with all other like empowered.

SIGNATURE: