

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000092515

Entity Name: VENDING R US, INC.

FILED
Apr 14, 2005
Secretary of State

Current Principal Place of Business:

C/O AMY POLINSKY
150 PEMBERTON WAY
AUSTIN, TX 78737 US

New Principal Place of Business:

2910 OLD ORCHID ROAD
DAVIE, FL 33328 US

Current Mailing Address:

C/O AMY POLINSKY
150 PEMBERTON WAY
AUSTIN, TX 78737 US

New Mailing Address:

2910 OLD ORCHID ROAD
DAVIE, FL 33328 US

FEI Number: 65-0872485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POLINSKY, AMY
C/O 5740 HOLLYWOOD BLVD
202
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

FLESNER, PAUL F DP
2910 OLD ORCHID ROAD
DAVIE, FL 33328 US

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: PAUL F. FLESNER

04/14/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: POLINSKY, AMY
Address: 150 PEMBERTON WAY
City-St-Zip: AUSTIN, TX 78737

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FLESNER, PAUL F DP
Address: 2910 OLD ORCHID ROAD
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL F. FLESNER

DP

04/14/2005

Electronic Signature of Signing Officer or Director

Date