

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90051 001 ***150.00

DOCUMENT # P99000005894

1. Entity Name

JDG VENDING, INC.

Principal Place of Business

Mailing Address

5190 WEST ATLANTIC AVENUE
 DELRAY BEACH FL 33484

5190 WEST ATLANTIC AVENUE
 DELRAY BEACH FL 33484-8131

2. Principal Place of Business

127 BAREFOOT COVE

Suite, Apt. #, etc.

3. Mailing Address

127 BAREFOOT COVE

Suite, Apt. #, etc.

City & State

HYPOLUXO, FL

City & State

HYPOLUXO, FL

Zip

33462

Country

USA

Zip

33462

Country

USA

4. FEI Number

65-0892317

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PARK, MICHAEL G
STROCK & STROCK & LAVAN LLP
200 S. BISCAYNE BLVD., SUITE 3300
MIAMI FL 33131-2385

7. Name and Address of New Registered Agent

Name

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

127 BAREFOOT COVE

City

HYPOLUXO

State

FL

Zip

33462

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

[Handwritten Signature]

2-3-00

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, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
President	JON A GOLDSTEIN	127 Barefoot Cove	HYPOLUXO FL 33462	<input type="checkbox"/>
VP	Shea Goldstein	127 Barefoot Cove	HYPOLUXO FL 33462	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D/P/T	GOLDSTEIN, JON	127 BAREFOOT COVE	HYPOLUXO, FL 33462	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D/VP/S	PARK, MICHAEL	127 BAREFOOT COVE	HYPOLUXO, FL 33462	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *X*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JON GOLDSTEIN

Date

2-3-00

Daytime Phone #

561-582-4434