

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000110650

FILED
Apr 30, 2004
Secretary of State

Entity Name: HOSPITALITY VENDING, INC.

Current Principal Place of Business:

P O BOX 692206
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

P O BOX 692206
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 58-9383518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUZ, MARK A
614 LAKE SPUR LANE
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

CRUZ, MARK A
103 CHERRY HILL CR
ALTAMONTE SPRINGS, FL 32714 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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: CRUZ, MARK A
Address: P O BOX 692206
City-St-Zip: ORLANDO, FL 32819

Title: P () Delete
Name: AVERBUKH, MIKHAYLO A
Address: P O BOX 692206
City-St-Zip: ORLANDO, FL 32819

Title: T () Delete
Name: CRUZ, CARLA
Address: P O BOX 692206
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: CRUZ, MARK A
Address: P O BOX 692206
City-St-Zip: ORLANDO, FL 32869

Title: P (X) Change () Addition
Name: AVERBUKH, MIKHAYLO A
Address: P O BOX 692206
City-St-Zip: ORLANDO, FL 32869

Title: T (X) Change () Addition
Name: CRUZ, CARLA
Address: P O BOX 692206
City-St-Zip: ORLANDO, FL 32869

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: MICHAEL AVERBUKH

V

04/30/2004

Electronic Signature of Signing Officer or Director

Date