

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2000 8:00 am
Secretary of State
 05-02-2000 90150 004 ***150.00

DOCUMENT # S28718

1. Entity Name
THE BIZZY VENDING COMPANY, INC.

Principal Place of Business 273 S STATE RD 7 PMB 555 MARGATE FL 33068 US	Mailing Address 273 S STATE RD 7 PMB 555 MARGATE FL 33068-5727 US
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2. Principal Place of Business Suite, Apt. #, etc. PMB 110 City & State	3. Mailing Address Suite, Apt. #, etc. PMB 110 City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0244155	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
OFSTEIN, CAROLE
273 S STATE RD 7
MARGATE FL 33068

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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
	DP	OFSTEIN, ROBERT L.	1820 97TH AVE. CORAL SPRGS FL
	DS	OFSTEIN, SCOTT J.	1820 97TH AVE. CORAL SPRGS FL
	DV	SLUTZKIN, NORMA	5912 BVIA DEZRAY DELRAY BCH FL

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

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: *Robert L. Ofstein* **FILED** 4/12/00 904-970-3292
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)