

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

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90129 025 ***150.00

DOCUMENT # S63494

1. Corporation Name

GREAT AMERICAN VENDING, INCORPORATED

Principal Place of Business
15223 NW 33RD PLACE
MIAMI FL 33054

Mailing Address
15223 NW 33RD PLACE
MIAMI FL 33054

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/27/1991

4. FEI Number

65-0275642

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

HENNEFORTH, RICHARD
13831 SW 59TH ST
MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP *VP does not exist* ☐ DELETE

NAME NELSON, EDWARD J
STREET ADDRESS 15223 NW 33RD PLACE
CITY-ST-ZIP MIAMI FL

<name is incorrect

TITLE PDS ☐ DELETE

NAME BOYNTON, SCOTT M.
STREET ADDRESS 15223 NW 33RD PLACE
CITY-ST-ZIP MIAMI FL

TITLE VT ☐ DELETE

NAME BOYNTON, MANUELA M
STREET ADDRESS 15223 NW 33RD PLACE
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Edward J. Weisman
1.3 STREET ADDRESS 10337 N. Commerce Parkway
1.4 CITY-ST-ZIP miramar FL 33025

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Scott M. Boynton
2.3 STREET ADDRESS 10337 N. Commerce Parkway
2.4 CITY-ST-ZIP miramar FL 33025

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME Manuela M. Boynton
3.3 STREET ADDRESS 10337 N. Commerce Parkway
3.4 CITY-ST-ZIP miramar FL 33025

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MANUELA BOYNTON 2-20-99 (954) 432 1650
Fax (954) 432 6508

CR2E034 (11/98)