CORPORATION **ANNUAL REPORT** 1998



PLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

Mailing Address

ALL N ONE VENDING, INC.

FILED Jun 01 1998 8:00am Secretary of State AND THE RESERVE OF THE PERSON 3. Date incorporated or Qualified 3e. Date of Last Report 09/18/1992 04/28/1999 FEI Number Applied For 59-3148935 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

Principal Place of Business 766REED CANAL RO. SOUTH DAYTONA PL BANIS - PEID BOUTH DAYTONA PLBALIS - 8-573 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country Zio Country This corporation has liability for intangible tax under s 199.032, 24 25 20 Florida Statutes Yes No Name and Address of New Registered Agent s. Name and Address of Current Registered Agent HALL RAMONA Street Address (P.O. Box Number is Not Acceptable) 760 REED CANAL RD. **SOUTH DAYTONA FL 82121** 1 City 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 officer 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 temiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.

12. OFFICERS AND DIRECTORS	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	
	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	85 IN TE
TOTE PD DELETE	1. 1 TITLE Change	Addition
HALL, RAMONA	1.2 NAME	
STREET ADDRESS 760 REED CANAL RD.	1.3 STREET ADDRESS .	
CITY-ST-ZP S DAYTONA FL 32 119	1.4 CITY - ST - 2IP	
¥mue □ DELETE	2. 1 TITLE Change	Addition.
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CITY-ST-ZP	2.4 CITY-ST-ZIP	
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CITY-8134-	3.4 CITY - ST - ZIP	
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privier dist i	4.4 CITY - ST - ZIP	
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NAME	700002543307	₩\
STREET ADDRESS	6.3 STREET ADDRESS -06/02/9801014027) 'W
(TV-8T-2IP	64 CITY-51-ZIP ***150.00	/ -

I do bereby certify that the information supplied with this taing is voluntarily turnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes. Turnier 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 path; 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 beginning 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 beginning to the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

IGNATURE!

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SIGNATURE