

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

— FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # V70475

1. Entity Name
ALL N ONE VENDING, INC.



Principal Place of Business
760 REED CANAL RD.
SOUTH DAYTONA, FL 32119-8513 US

Mailing Address
760 REED CANAL RD.
SOUTH DAYTONA, FL 32119-8513 US



02232006 No Chg-F CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3148935

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HALL, RAMONA
760 REED CANAL RD
SOUTH DAYTONA, FL 32119

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

UN0000449142
03/03/06 80040 014 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HALL, RAMONA
STREET ADDRESS 760 REED CANAL RD.
CITY- ST- ZIP SOUTH DAYTONA, FL 321198513

TITLE STD
NAME HALL, CHARLES L
STREET ADDRESS 760 REED CANAL ROAD
CITY- ST- ZIP SOUTH DAYTONA, FL 321198513

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ramona J Hall RAMONA J HALL 2-23-06 386-761-4530
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #