

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 13, 2000 08:00 AM
Secretary of State

DOCUMENT # F98000001512

1. Entity Name
PAYDAY LOAN CORPORATION

Principal Place of Business 3257 KATELLA AVE LOS ALAMITOS CA 90720	Mailing Address 3257 KATELLA AVE LOS ALAMITOS CA 90720
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2. Principal Place of Business 631 S. BROOKHURST STREET SUITE 101	3. Mailing Address 631 S. BROOKHURST STREET SUITE 101
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City & State ANAHEIM CA	City & State ANAHEIM CA
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4. FEI Number 33-0776133	Applied For <input type="checkbox"/> Not Applicable
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Zip 92804	Country	Zip 92804	Country
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CILLO ANITA
 3041 NE 47TH ST.
 FT LAUDERDALE FL 33309 US

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 _____ **09/13/2000**
Signature, typed or printed name of registered agent and title if applicable (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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	CHIANG ROBERT	
STREET ADDRESS	8516 PARAMOUNT BLVD.	
CITY-ST-ZIP	DOWNEY CA 90240	

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHIANG ROBERT	
STREET ADDRESS	631 S. BROOKHURST STREET, SUITE 101	
CITY-ST-ZIP	ANAHEIM CA 92804	

TITLE	VD	<input type="checkbox"/> Delete
NAME	KRISFALUSI CAMERON	
STREET ADDRESS	2823 E. LINCOLN AVE.	
CITY-ST-ZIP	ANAHEIM CA 92806	

TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRISFALUSI CAMERON	
STREET ADDRESS	631 S. BROOKHURST STREET, SUITE 101	
CITY-ST-ZIP	ANAHEIM CA 92804	

TITLE	DC	<input checked="" type="checkbox"/> Delete
NAME	BLAKE JAMES	
STREET ADDRESS	8271 GUMWOOD CIRCLE	
CITY-ST-ZIP	WESTMINSTER CA 92683	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PST	<input type="checkbox"/> Delete
NAME	BLAKE JAMES	
STREET ADDRESS	8271 GUMWOOD CIRCLE	
CITY-ST-ZIP	WESTMINSTER CA 92683	

TITLE	PCD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLAKE-ZUNIGA JOHN	
STREET ADDRESS	631 S. BROOKHURST STREET, SUITE 101	
CITY-ST-ZIP	ANAHEIM CA 92804	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: CAMERON KRISFALUSI

09/13/2000