


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005 08:00 A
Secretary of State

DOCUMENT # P02000084019
 1. Entity Name
 PRESIDENTE CHECK CASHING CORPORATION



Principal Place of Business: 1895 SW 8ST. MIAMI, FL 33135
 Mailing Address: 5900 SW 97TH CT. MIAMI, FL 33173

DO NOT WRITE IN THIS SPACE



01052005 No Chg-P CR2E034 (10/03)

4. FET Number: 47-0881723 Applied For: Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MANZANO, GERARDO
 5900 SW 97TH CT
 MIAMI, FL 33173

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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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

NAME	PSTD MANZANO, GERARDO
STREET ADDRESS	5900 SW 97TH CT
CITY-STATE-ZIP	MIAMI, FL 33173
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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12. 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 10 or Block 11 if changing, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gerardo Manzano 1/5/05 305-541-7080
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Phone #