

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000095350 (1)

1. Corporation Name

RICH & JEFF PAWN CORP.



Principal Place of Business

Mailing Address

1278 MARTINQUE COURT MARCO ISLAND FL 33937

1278 MARTINQUE COURT MARCO ISLAND FL 33937

3. Date Incorporated or Qualified 12/15/1995  
3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 11263 E. TAMiami TR

26 90 J. GRIESSER

4. FEI Number 65-0638892  
Applied For Not Applicable

22 UNIT D

27 17 N. BROOKSIDE RD

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

23 NAPLES FL

28 SPRINGFIELD PA

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

24 Zip 33942 25 Country LOLLIER

29 Zip 19064 30 Country DELAWARE

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOODWARD, CRAIG R  
WOODWARD, PIRES, ANDERSON & LOMBARDO, P.A.  
606 BALD EAGLE DRIVE  
MARCO ISLAND FL 33937

81 Name JEFF BEATTY  
82 Street Address (P.O. Box Number is Not Acceptable) 1278 MARTINQUE COURT  
83  
84 City MARCO ISLAND FL 85 Zip Code 33937

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

*Jeffy Beatty*

Signature typed in full name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

|                |                       |                                 |
|----------------|-----------------------|---------------------------------|
| TITLE          | D                     | <input type="checkbox"/> DELETE |
| NAME           | OKONSKI, RICHARD      |                                 |
| STREET ADDRESS | 1278 MARTINQUE COURT  |                                 |
| CITY-ST-ZIP    | MARCO ISLAND FL 33937 |                                 |
| TITLE          | D                     | <input type="checkbox"/> DELETE |
| NAME           | BEATTY, JEFF          |                                 |
| STREET ADDRESS | 1278 MARTINQUE COURT  |                                 |
| CITY-ST-ZIP    | MARCO ISLAND FL 33937 |                                 |
| TITLE          |                       | <input type="checkbox"/> DELETE |
| NAME           |                       |                                 |
| STREET ADDRESS |                       |                                 |
| CITY-ST-ZIP    |                       |                                 |
| TITLE          |                       | <input type="checkbox"/> DELETE |
| NAME           |                       |                                 |
| STREET ADDRESS |                       |                                 |
| CITY-ST-ZIP    |                       |                                 |
| TITLE          |                       | <input type="checkbox"/> DELETE |
| NAME           |                       |                                 |
| STREET ADDRESS |                       |                                 |
| CITY-ST-ZIP    |                       |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |   |
|--------------------|---|
| 1.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME           |   |
| 1.3 STREET ADDRESS |   |
| 1.4 CITY-ST-ZIP    |   |
| 2.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME           |   |
| 2.3 STREET ADDRESS |   |
| 2.4 CITY-ST-ZIP    |   |
| 3.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME           |   |
| 3.3 STREET ADDRESS |   |
| 3.4 CITY-ST-ZIP    |   |
| 4.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME           |   |
| 4.3 STREET ADDRESS |   |
| 4.4 CITY-ST-ZIP    |   |
| 5.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME           |   |
| 5.3 STREET ADDRESS |   |
| 5.4 CITY-ST-ZIP    |   |
| 6.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME           |   |
| 6.3 STREET ADDRESS |   |
| 6.4 CITY-ST-ZIP    |   |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Richard Okonski*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96 (215) 781-9041  
Date Daytime Phone #

CR2E034 (12/95)