SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Sep 23, 1999 8:00 am Secretary of State

09-23-1999 90002 026 ***550.00

1999	WE THE	_
DOCUMENT # 1. Corporation Name	P95000095350	J

RICH	8	JEFF	PAWN	CORP.
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Principal Place of Business Mailing Address			\$8(8) Q0(8) \$8\$\$) B)(8	i a iindi exili bali i	Ш				
11263 E. TAIAMI TR C/O GRIESSER, J.									
UNIT D	MI 111	17 N. BROOKSIDE RD							
NAPLES FL 33	942	SPRINGFIELD PA 19064				DO NOT WRITE I	IN THIS SPACE		
US		US				3. Date Incorporated or Qualified			
						12/15/1995		<u> </u>	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For	-
21		26				65-0638892		Not Applicat	$\overline{}$
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	▼	75 Additional e Required	İ
22 City & State	-	City & State				8 Floring Compaign Financing			\dashv
23	,	28				6. Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current			
24	25	29	30	•		Intangible Personal Property.	Yes	☐ No	
1	9. Name and Address of Currer		11			10. Name and Address of New Regi	istered Agent		
		·		81	Name				
	TTY, JEFF			82	Street Address	ss (P.O. Box Number is Not Acceptable			\dashv
	B MARTINGUE COURT			~	Ollege Addio.	33 (F.O. DOX PAINDER IS NOT NOOF PLANE	′ <u> </u>		
MAF	RCO ISLAND FL 33937			83		/			
				84	City		85	Zip Code	\dashv
					City	·	FL "	Zip Code	
office or	to the provisions of sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was	authorize	d by t	amed corpora he corporation	ition submits this statement for the purpo o's board of directors. I hereby accept th	se of changing in se appointment a	ts registered is registered	
SIGNATURE .									
40	Signature, typed or printed name of registered age	nt and title if applicable. (N ND DIRECTORS	IOTE: Registe	red Age	ent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	CTORS IN 12	;
12.	D OFFICERS AF	DELETE	1.1 TO	ΠF		ADDITIONS/01/A1023 13 01110	Char		\neg
NAME	OKOMSKI, RICHARD		1.2 NA					ige nous	
STREET ADDRESS	1278 MARTINGUE COURT				DDRESS				ı
CITY-ST-ZIP	MARCO ISLAND FL			TY-ST-Z	1				
TITLE	D	DELETE	2.1 TI		-		Char	nge Additi	ion
NAME	BEATTY, JEFF		2.2 NA					.90	
STREET ADDRESS	1278 MARTINQUE COURT		2.3 ST	REET A	DDRESS				-
CITY-ST-ZIP	MARCO ISLAND FL 33937			TY-ST-Z	· ·				
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NAME			3.2 N	ME			·	•	ŀ
STREET ADDRESS			3.3 ST	RÉET A	DORESS				
CITY-ST-ZIP			3.4 CI	TY-ST-Z	IP				
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NAME			4.2 NA	ME					
STREET ADDRESS			4.3 ST	REETA	DORESS				Į
CITY-ST-ZIP			4.4 CI	TY-ST-Z	IP				
TITLE		☐ DELETE	5.1 TI	ΠLE			Char	nge 🗌 Additi	ion
NAME			5.2 NA	ME					
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CITY-ST-ZIP	_			TY-ST-Z	IP	·			
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NAMÉ			6.2 NA	ME					İ
STREET ADDRESS			6.3 ST	REET A	DORESS				Ì
CITY-ST-ZIP			6.4 CI	TY-ST-Z	IP				

14. 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 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:

9-13-99 (6K)328-9958