FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 FEB 25 AM 11:45

DOCUMENT # P94000013576

1. Corporation Name
CASH FOR LIFE, INC.

Principal Place of Business — Mailing Address
1400 E. Oakland Park Blvd., Suite 205
Fort Lauderdale, Florida 33334

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2. Principal Place of Business
21 3471 N Federal Hwy
Suite, Apt. #, etc.
22 Suite 501
City & State
23 Ft. Lauderdale, Florida
Zip — Country
24 33306 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip — Country
29 30

4. FEI Number 65-0650375 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

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

8. This corporation owes the current year Intangible Personal Property Tax [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
Keith M. Thomas
2800 S. Oakland Forrest Drive, Suite 2103
Oakland Park, Florida 33309

10. Name and Address of New Registered Agent
81 Name: Thomas G. Pye
82 Street Address (P.O. Box Number is Not Acceptable): 2787 E.Oakland Park Blvd, Suite 301
83
84 City: Ft. Lauderdale FL 85 Zip Code 33306

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 [signature] Thomas G. Pye 2/8/99

12. OFFICERS AND DIRECTORS

TITLE	P/S/T & Director	[ ] DELETE
NAME	Keith M. Thomas	
STREET ADDRESS	3471 N. Federal Highway, Suite 505	
CITY-ST-ZIP	Ft. Lauderdale, Florida 33306	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 [ ] Change [ ] Addition

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-03/02/99--01061--009
****150.00 ****150.00

DB 2-25-99

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: [signature] Keith M. Thomas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR