

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

CORPORATION  
ANNUAL REPORT  
1995



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

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 17 AM 11:48

DOCUMENT # **V05655** (8)

1. Corporation Name  
**27TH AVENUE PAWN SHOP, INC.**

Principal Place of Business: **2043 NW 27TH AVE MIAMI FL**  
Mailing Address: **2043 NW 27TH AVE MIAMI FL**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		2a		01/10/1992	02/04/1994
22. State Apt # etc		27. State Apt # etc		4. FET Number	Applied For
				65-0308684	Not Applicable
23. City & State		28. City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
				<input type="checkbox"/>	
24. Zip		25. Country	29. Zip	6. Election Campaign Financing Trust Fund Contribution	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CEASE, MICHAEL S 2720 W FLAGLER STREET MIAMI FL 33135				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3			
				B4	City	B5	Zip Code

11. Pursuant to the provisions of Sections 607.0402 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 Statute.

SIGNATURE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95			
NAME		D SMITH AL		1. NAME		NO LONGER WITH CORPORATION	
STREET ADDRESS		2043 NW 27TH AVE		2. STREET ADDRESS			
CITY & STATE		MIAMI FL		3. CITY & STATE			
NAME		P ROMAN, HERNZ		4. NAME			
STREET ADDRESS		2043 NW 27TH AVE		5. STREET ADDRESS			
CITY & STATE		MIAMI FL		6. CITY & STATE			
NAME				7. NAME			
STREET ADDRESS				8. STREET ADDRESS			
CITY & STATE				9. CITY & STATE			
NAME				10. NAME			
STREET ADDRESS				11. STREET ADDRESS			
CITY & STATE				12. CITY & STATE			
NAME				13. NAME			
STREET ADDRESS				14. STREET ADDRESS			
CITY & STATE				15. CITY & STATE			

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, for the corporation stated as to have filed this Florida Statute. I further certify that the information is true to the best of my knowledge and belief, and that the corporation shall have the same legal effect as if such officer or director had been personally and directly named in the report as required by Chapter 607, Florida Statutes, and that my name appears on this report as the registered agent of the corporation.

SIGNATURE: *Roman Hernandez* 1/9/95 305-638-3632  
 OFFICIAL AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR