Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90029 024 ***150.00

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**

DOCUMENT # P98000085021

1. Corporation Name				
QUICK LOAN COMPANY, INC.				
			I HERITAĞI ILE YOZUN BERLI AĞRIN AĞRIN AĞRIN AĞRIN A	AN NEGEL ENGLI BOND HADDI INDI NOCI
Principal Place of Business	Mailing Address			(8) 1016: 21:11 25:12 (128) 118: 129:
	17820 S. DIXIE HWY. MIAMI FL 33157			
			DO NOT WRITE IN TH	IS SPACE
			3. Date Incorporated or Qualifed	
			10/02/1998	
	2a. Mailing Address	4/16	4. FEI Number	Applied For
21 13480 SW 2485T 2	6 PO BOX	92 (38)	65-0867719	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	7		3. Certificate of Status Desired	Fee Required
City & State Princeton FC 23	City & State 8 Princeton	FC	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year	Intangible
24 33092 ₂₅ 29	g 33092 b	0	Personal Property Tax.	∐Yes □No
9. Name and Address of Current Reg	gistered Agent	<u>, </u>	10. Name and Address of New Registere	d Agent
	<u> </u>	81 Name	TOHOL SILA	221V
SVADBIK, JOHN			ress (P.O. Box Number is Not Acceptable)	
17820 S. DIXIE HWY		13480 SW 2485T		
MIAMI FL 33157		83		
				T
		84 City //	/Am/ F	L 85 Zip Code 33,092
11 Pursuant to the provisions of Sections 607 0502 and	d 607.1508. Florida Statutes	the above-named corpo	pration submits this statement for the purpose	of changing its registered
 Pursuant to the provisions of Sections 607.0502 and office or registered agent, or both, in the State of Fic agent. I am familiar with, and accept the obligations 	orida. Such change was auth of Section 607.0505, Florid	horized by the corporation la Statutes.	n's board of directors. I hereby accept the app	ointment as registered
SIGNATURE Signature, typed or printed name of reparated agent and to	<i>A/V</i> (egistered Agent signature required	SVAVBIA 4	-21-99
12. OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME SYADBIK, ANTON		1.2 NAME		
	1 ATOMO O DIVIT LIBERY			· }
CITY-ST-ZIP MIAMI FL 33157		1.4 CITY-ST-ZIP		
TITLE D	☐ DELETE	2.1 TITLE		Change Addition
NAME SVADBIK, JOHN		2.2 NAME		
	47000 O DIVIT 1840/			
CITY-ST-ZIP MIAMI FL 33157		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		Ì
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE	<u> </u>	☐ Change ☐ Addition
NAME		4, 2 NAME		

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 addless, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

□ DELETE

☐ DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRES

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TILE

NAME

SIGN

Change

☐ Change

☐ Addition

☐ Addition