2002 UNIFORM BUSINESS REPORT (UBR)

AMENDED

PENDING
06-03-2002 91201 047 ****61.25
F97000005403

FILED
02 JUN 28 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
5-15-02

[redacted]

DOCUMENT # F97000005403

1. Entity Name
POPULAR CASH EXPRESS, INC.

Principal Place of Business	Mailing Address
1401 SW 1ST STREET SUITE A MIAMI FL 33155	6200 N. HIAWATHA SUITE 200 CHICAGO IL 60646

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3470902 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RODRIQUEZ, JESUS 1401 SW 1ST ST A MIAMI FL 33155	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

his corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILED NOW: FEE IS $150.00
AFTER MAY 1, 2002: Fee will be $550.00
Make Check Payable to: Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C CARRION, RICHARD L 209 MUNOZ RIVERA AVE. HATO REY PR 00918	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV HERENCIA, ROBERTO R 400 W NORTH AVE CHICAGO IL 60639	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVT RIERA, JOSE J 6200 N HIAWATHA STE 200 CHICAGO FL 60646	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DCEO GAGERMAN, JEROME S 6200 N HIAWATHA, SUITE 200 CHICAGO IL 60646	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LEHMAN, LARRY 6200 N. HIAWATHA, STE 200 CHICAGO, IL 60646 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV GAGERMAN, GARY 6200 N HIAWATHA, SUITE 200 CHICAGO IL 60646	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V NIERMAN, MARK 1415 GARDENA AVE GLENDALE, CA 91204 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DE ALVAREZ, BRUNILDA S 209 MUNOZ RIVER AVE. HATO REY PR 00918	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] LARRY LEHMAN 5-2-02 (773) 205-8300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/01)