2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2004 8:00 am
Secretary of State
07-28-2004 90021 004 ***150.00

DOCUMENT # G12358

1. Entity Name
A-PAWN AND GUN, INC.

Principal Place of Business	Mailing Address
721 N STATE RD #7 HOLLYWOOD, FL 33021 US	721 N STATE RD #7 HOLLYWOOD, FL 33021 US

2. Principal Place of Business		3. Mailing Address	
311 N SURF ROAD		311 N SURF ROAD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: HOLLYWOOD FL		City & State: HOLLYWOOD FL	
Zip: 33019	Country: BROWARD	Zip: 33019	Country: BROWARD

07232004 Chg-P CR2E034 (10/03)

4. FEI Number 59-2237137 ☐ Applied For ☐ Not Applicable

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

6. **Name and Address of Current Registered Agent**

~~MARMER, ALLAN~~
721 N STATE RD #7
HOLLYWOOD, FL 33021

7. **Name and Address of New Registered Agent**

Name: MARMER, ALLAN
Street Address (P.O. Box Number is Not Acceptable): 311 N SURF ROAD
City: HOLLYWOOD FL Zip Code 33019

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Allan Marmer ALLAN MARMER 7/27/2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DP	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MARMER, ALLAN		NAME	
STREET ADDRESS	311 N. SURF ROAD		STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33019		CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
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CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Allan Marmer ALLAN MARMER 7/27/2004 (954) 648-5514
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #